| Fill in this information to identify your case: | | |
|---|-------------------------------|-------------------|
| United States Bankruptcy Court for the: | | |
| DISTRICT OF NEVADA | | |
| Case number (if known) | Chapter you are filing under: | |
| | ☐ Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | Chapter 13 | ☐ Check if amende |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | art 1: Identify Yourself | | | | | | | | |
|-----|---|---|---|--|--|--|--|--|--|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | | | | | | |
| 1. | Your full name | | | | | | | | |
| | Write the name that is on your government-issued picture identification (for example, your driver's license or passport). | Carmelo Elmer First name Gurango Middle name | Tracy First name Renee Middle name | | | | | | |
| | Bring your picture identification to your meeting with the trustee. | Escolano Last name and Suffix (Sr., Jr., II, III) | Geraldo Last name and Suffix (Sr., Jr., II, III) | | | | | | |
| 2. | All other names you have used in the last 8 years | | | | | | | | |
| | Include your married or maiden names. | | | | | | | | |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-0483 | xxx-xx-2725 | | | | | | |

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Case number (if known)

Carmelo Elmer Gurango Escolano

Debtor 1

Tracy Renee Geraldo Debtor 2 About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. I have not used any business name or EINs. used in the last 8 years Include trade names and Business name(s) Business name(s) doing business as names EINs EINs Where you live If Debtor 2 lives at a different address: 8321 W. Sahara Avenue, Apt. 2117 Las Vegas, NV 89117 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code Clark County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Check one: Check one: Why you are choosing this district to file for bankruptcy Over the last 180 days before filing this petition, Over the last 180 days before filing this petition, I I have lived in this district longer than in any have lived in this district longer than in any other other district. district. I have another reason. I have another reason. Explain. (See 28 U.S.C. § 1408.) Explain. (See 28 U.S.C. § 1408.)

| | Debtor 1 Carmelo Elmer Gurango Escolano Debtor 2 Tracy Renee Geraldo | | | | Case number (if known) | | | | |
|-----|---|---|--|---|---------------------------------------|--|---|--|--|
| Par | t 2: Tell the Court About | Your Banl | kruptcy Ca | se | | | | | |
| 7. | The chapter of the Bankruptcy Code you are | Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. | | | | | | | |
| | choosing to file under | ☐ Chap | ☐ Chapter 7 | | | | | | |
| | | ☐ Chap | ☐ Chapter 11 | | | | | | |
| | | ☐ Chap | oter 12 | | | | | | |
| | | ■ Chap | oter 13 | | | | | | |
| 8. | How you will pay the fee | ab ord a p | out how yo der. If your ore-printed need to pay | the fee in installments. If | are paying ayment or you choos | the fee yourself, you your behalf, you | , you may pay with cash ur attorney may pay with | n, cashier's check, or money on a credit card or check with | |
| | | □ I re bu ap | equest tha t is not requ plies to you | e in Installments (Official For t my fee be waived (You ma uired to, waive your fee, and ur family size and you are un on to Have the Chapter 7 Filin | ay request may do so able to pa | only if your inco the fee in insta | ome is less than 150% of liments). If you choose t | of the official poverty line that this option, you must fill out | |
| 9. | Have you filed for | □ No. | | | | | | | |
| | bankruptcy within the last 8 years? | Yes. | | | | | | | |
| | | | District | Las Vegas, Nevada | When | 6/01/11 | Case number | 11-18626 | |
| | | | District | | When | | Case number | | |
| | | | District | | When | | Case number | | |
| 10. | Are any bankruptcy cases pending or being | ■ No | | | | | | | |
| | filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ☐ Yes. | | | | | | | |
| | | | Debtor | | | | Relationship to y | ou | |
| | | | District | | When | | Case number, if | known | |
| | | | Debtor | | | | Relationship to y | ou | |
| | | | District | | When | | Case number, if | known | |
| 11. | Do you rent your | □ No. | Go to li | ne 12. | | | | | |
| | residence? | Yes. | Has yo | ur landlord obtained an evict | tion judgm | ent against you? | • | | |
| | | | | No. Go to line 12. | | | | | |
| | | | | Yes. Fill out <i>Initial Statemer</i> bankruptcy petition. | nt About ar | n Eviction Judgm | nent Against You (Form | 101A) and file it with this | |

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| | tor 1 Carmelo Elmer Gu tor 2 Tracy Renee Gera | | scolano | Case number (if known) | |
|-----|---|------------------------|---|--|--|
| | | | | | |
| Par | Report About Any Bu | sinesses | You Own as a Sole Proprie | etor | |
| 12. | Are you a sole proprietor | | | | |
| | of any full- or part-time business? | ■ No. | ■ No. Go to Part 4. | | |
| | | ☐ Yes. | Name and location of bu | siness | |
| | A sole proprietorship is a | | | | |
| | business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | Name of business, if any | | |
| | If you have more than one sole proprietorship, use a separate sheet and attach | | Number, Street, City, Sta | ate & ZIP Code | |
| | it to this petition. | | Check the appropriate b | ox to describe your business: | |
| | | | ☐ Health Care Bus | iness (as defined in 11 U.S.C. § 101(27A)) | |
| | | | ☐ Single Asset Rea | al Estate (as defined in 11 U.S.C. § 101(51B)) | |
| | | | ☐ Stockbroker (as | defined in 11 U.S.C. § 101(53A)) | |
| | | | ☐ Commodity Brok | er (as defined in 11 U.S.C. § 101(6)) | |
| | | | ☐ None of the above | ve | |
| 13. | Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business</i> debtor? | deadlines operation | s. If you indicate that you are | court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure | |
| | For a definition of small | ■ No. | I am not filing under Cha | pter 11. | |
| | business debtor, see 11 U.S.C. § 101(51D). | □ No. | I am filing under Chapter Code. | r 11, but I am NOT a small business debtor according to the definition in the Bankruptcy | |
| | | ☐ Yes. | I am filing under Chapter | r 11 and I am a small business debtor according to the definition in the Bankruptcy Code. | |
| Par | t 4: Report if You Own or | Have Any | Hazardous Property or A | ny Property That Needs Immediate Attention | |
| 14. | Do you own or have any | ■ No. | | | |
| | property that poses or is alleged to pose a threat | ☐ Yes. | | | |
| | of imminent and identifiable hazard to | | What is the hazard? | | |
| | public health or safety? | | | | |
| | Or do you own any property that needs immediate attention? | | If immediate attention is needed, why is it needed? | | |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | Where is the property? | Number, Street, City, State & Zip Code | |
| | | | | | |

Case 18-10974-mkn Doc 1 Entered 02/26/18 16:03:19 Page 5 of 59 Debtor 1 Carmelo Elmer Gurango Escolano Debtor 2 **Tracy Renee Geraldo** Case number (if known) Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): 15. Tell the court whether You must check one: You must check one: you have received a I received a briefing from an approved credit I received a briefing from an approved credit counseling agency within the 180 days before I filed briefing about credit counseling agency within the 180 days before I counseling. filed this bankruptcy petition, and I received a this bankruptcy petition, and I received a certificate of certificate of completion. completion. The law requires that you Attach a copy of the certificate and the payment Attach a copy of the certificate and the payment plan, if receive a briefing about plan, if any, that you developed with the agency. any, that you developed with the agency. credit counseling before you file for bankruptcy. I received a briefing from an approved credit I received a briefing from an approved credit You must truthfully check counseling agency within the 180 days before I filed counseling agency within the 180 days before I one of the following filed this bankruptcy petition, but I do not have this bankruptcy petition, but I do not have a certificate choices. If you cannot do a certificate of completion. so, you are not eligible to of completion. file. Within 14 days after you file this bankruptcy Within 14 days after you file this bankruptcy petition, you petition, you MUST file a copy of the certificate and MUST file a copy of the certificate and payment plan, if If you file anyway, the court payment plan, if any. can dismiss your case, you will lose whatever filing fee I certify that I asked for credit counseling ☐ I certify that I asked for credit counseling services you paid, and your services from an approved agency, but was from an approved agency, but was unable to obtain creditors can begin unable to obtain those services during the 7 those services during the 7 days after I made my collection activities again. days after I made my request, and exigent request, and exigent circumstances merit a 30-day circumstances merit a 30-day temporary waiver temporary waiver of the requirement. of the requirement. To ask for a 30-day temporary waiver of the requirement, To ask for a 30-day temporary waiver of the attach a separate sheet explaining what efforts you made requirement, attach a separate sheet explaining to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for circumstances required you to file this case. bankruptcy, and what exigent circumstances Your case may be dismissed if the court is dissatisfied required you to file this case. with your reasons for not receiving a briefing before you Your case may be dismissed if the court is filed for bankruptcy. dissatisfied with your reasons for not receiving a If the court is satisfied with your reasons, you must still briefing before you filed for bankruptcy. receive a briefing within 30 days after you file. You must If the court is satisfied with your reasons, you must file a certificate from the approved agency, along with a still receive a briefing within 30 days after you file. copy of the payment plan you developed, if any. If you do You must file a certificate from the approved not do so, your case may be dismissed. agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case Any extension of the 30-day deadline is granted only for may be dismissed. cause and is limited to a maximum of 15 days. Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about I am not required to receive a briefing about credit credit counseling because of: counseling because of: Incapacity. Incapacity. I have a mental illness or a mental deficiency that I have a mental illness or a mental deficiency that makes me incapable of realizing or makes me incapable of realizing or making rational making rational decisions about finances. decisions about finances. Disability. Disability. My physical disability causes me to be unable to My physical disability causes me to be unable to participate in a briefing in person, participate in a briefing in person, by phone, or by phone, or through the internet, even after I through the internet, even after I reasonably tried to reasonably tried to do so. do so. Active duty. Active duty. П I am currently on active military duty in a I am currently on active military duty in a military

Voluntary Petition for Individuals Filing for Bankruptcy

military combat zone.

If you believe you are not required to receive a

briefing about credit counseling, you must file a

motion for waiver credit counseling with the court.

combat zone.

of credit counseling with the court.

If you believe you are not required to receive a briefing

about credit counseling, you must file a motion for waiver

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| | tor 1 Carmelo Elmer Gu tor 2 Tracy Renee Gera | | scolano | | Case nu | ımber (if known) | | |
|-----|--|--|---|--|-----------------------------------|-------------------------------------|---|--|
| Par | t 6: Answer These Questi | ions for Re | eporting Purposes | | | | | |
| 16. | What kind of debts do you have? | 16a. | Are your debts primarily consummend individual primarily for a personal, for the No. Go to line 16b. | | | defined in 11 U.S.C. § | 101(8) as "incurred by an | |
| | | 16b. | ■ Yes. Go to line 17. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. | | | | | |
| | | | ☐ No. Go to line 16c. | | | | | |
| | | 16c. | Yes. Go to line 17. State the type of debts you owe that | at are not consun | ner debts or bus | siness debts | | |
| 17. | Are you filing under Chapter 7? | ■ No. | I am not filing under Chapter 7. Go | to line 18. | | | | |
| | Do you estimate that after any exempt property is excluded and | ☐ Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? | | | | | | |
| | administrative expenses are paid that funds will be available for distribution to unsecured creditors? | | □ No □ Yes | | | | □ 25,001-50,000 □ 50,001-100,000 | |
| 18. | How many Creditors do you estimate that you owe? | ■ 1-49 □ 50-99 □ 100-19 □ 200-99 | 99 | ☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,00 | | | 00,000 | |
| 19. | How much do you estimate your assets to be worth? | □ \$100,0 | 50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million | □ \$1,000,001 - □ \$10,000,001 □ \$50,000,001 □ \$100,000,00 | - \$50 million - \$100 million | □ \$1,000,0 □ \$10,000, | 0,001 - \$1 billion 00,001 - \$10 billion 000,001 - \$50 billion n \$50 billion | |
| 20. | How much do you estimate your liabilities to be? | □ \$100,0 | 50,000 001 - \$100,000 001 - \$500,000 001 - \$1 million | □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ | | □ \$1,000,0 □ \$10,000 | 0,001 - \$1 billion 000,001 - \$10 billion ,000,001 - \$50 billion an \$50 billion | |
| Par | 7: Sign Below | | | | | | | |
| For | you | I have ex | amined this petition, and I declare u | nder penalty of p | erjury that the ir | nformation provided is | true and correct. | |
| | | | chosen to file under Chapter 7, I am tates Code. I understand the relief a | | | | | |
| | | If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). | | | | | elp me fill out this | |
| | | I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. | | | | | on. | |
| | | bankrupto and 3571 | | 0,000, or impriso | nment for up to | 20 years, or both. 18 l | | |
| | | Carmelo | nelo Elmer Gurango Escolano o Elmer Gurango Escolano e of Debtor 1 | | Is/ Tracy Reneed Signature of De | e Geraldo | | |
| | | Executed | February 26, 2018 MM / DD / YYYY | | | February 26, 2018 MM / DD / YYYY | | |

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| Debtor 1 Carmelo Elmer Go Tracy Renee Gera | • | Case number (if known) | | | |
|---|---|---|---|--|--|
| For your attorney, if you are represented by one If you are not represented by | I, the attorney for the debtor(s) named in this petition under Chapter 7, 11, 12, or 13 of title 11, United Stat for which the person is eligible. I also certify that I hand, in a case in which § 707(b)(4)(D) applies, certify | es Code, and have eave delivered to the | explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b) | | |
| an attorney, you do not need to file this page. | schedules filed with the petition is incorrect. | , | | | |
| to me une page. | /s/ Xenophon Peters, Esq. | Date | February 26, 2018 | | |
| | Signature of Attorney for Debtor | | MM / DD / YYYY | | |
| | Xenophon Peters, Esq. | | | | |
| | Printed name | | | | |
| | Peters & Associates, LLP. | | | | |
| | Firm name | | | | |
| | 6173 S. Rainbow Blvd. | | | | |
| | Las Vegas, NV 89118 | | | | |
| | Number, Street, City, State & ZIP Code | | | | |
| | Contact phone | Email address | | | |
| | 11241 | - | | | |
| | Bar number & State | | | | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation | |
|------------|--------------------|--|
| \$245 | filing fee | |
| \$75 | administrative fee | |
| + \$15 | trustee surcharge | |
| \$335 | total fee | |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_form

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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| | in this information to i | dentify your o | case: | | | |
|--------|--|------------------|---|--|------------|-----------------------|
| Del | btor 1 Carme | | urango Escolano Middle Name | Last Name | | |
| Del | | Renee Gera | | 243.144.10 | | |
| (Spc | ouse if, filing) First Name | | Middle Name | Last Name | | |
| Uni | ited States Bankruptcy C | ourt for the: | DISTRICT OF NEVADA | | | |
| Cas | se number | | | | | |
| (if kr | nown) | | | | _ | eck if this is an |
| | | | | | arr | ended filing |
| ~ (| ··· 404 | 20 | | | | |
| | ficial Form 100 | | | d Contain Ctatiotical Information | | |
| | | | | are filing together, both are equally responsible | | 12/15 |
| info | rmation. Fill out all of y | our schedule | s first; then complete th | e information on this form. If you are filing amer the box at the top of this page. | | |
| Par | tt 1: Summarize Your | Assets | | | | |
| | | | | | | r assets |
| | | | | | Valu | ie of what you own |
| 1. | Schedule A/B: Proper | rty (Official Fo | rm 106A/B) | | \$ | 0.00 |
| | | | | | | |
| | 1b. Copy line 62, Total | personal prop | perty, from Schedule A/B | | \$_ | 11,036.00 |
| | 1c. Copy line 63, Total | of all property | on Schedule A/B | | \$_ | 11,036.00 |
| Par | rt 2: Summarize Your | Liabilities | | | | |
| | | | | | You | r liabilities |
| | | | | | | ount you owe |
| 2. | | | aims Secured by Property | | Φ. | 0.00 |
| | 2a. Copy the total you | isted in Colun | nn A, <i>Amount of claim,</i> at t | the bottom of the last page of Part 1 of Schedule D | . \$ _ | 0.00 |
| 3. | | | Insecured Claims (Official | l Form 106E/F) s) from line 6e of <i>Schedule E/F</i> | \$ | 0.00 |
| | | | " | , | · - | 40.500.00 |
| | 3b. Copy the total clair | ns from Part 2 | (nonpriority unsecured cl | laims) from line 6j of <i>Schedule E/F</i> | \$_ | 46,533.30 |
| | | | | Your total liabilitie | ve (¢ | 46,533.30 |
| | | | | Tour total nabilitie | • <u> </u> | 40,333.30 |
| Par | rt 3: Summarize Your | Income and | Expenses | | | |
| | | | | | | |
| 4. | Schedule I: Your Incon Copy your combined m | | | 1 | \$_ | 4,413.90 |
| 5. | Schedule J: Your Expe | nses (Official | Form 106J) | | | |
| | Copy your monthly exp | enses from lin | ne 22c of Schedule J | | \$_ | 4,266.00 |
| Par | rt 4: Answer These Q | uestions for | Administrative and Stati | stical Records | | |
| 6. | | | r Chapters 7, 11, or 13? on this part of the form. Cl | heck this box and submit this form to the court with y | our other | schedules. |
| 7. | ■ Yes What kind of debt do | you have? | | | | |
| | Your debts are p | rimarily cons | | debts are those "incurred by an individual primarily for grant of the statistical purposes. 28 U.S.C. § 159. | or a perso | nal, family, or |
| | | ot primarily o | consumer debts. You have | ve nothing to report on this part of the form. Check to | his box an | d submit this form to |

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

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Carmelo Elmer Gurango Escolano Debtor 2 **Tracy Renee Geraldo** Case number (if known)

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

4,535.89

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| From Part 4 on Schedule E/F, copy the following: | Tota | al claim |
|--|------|----------|
| 9a. Domestic support obligations (Copy line 6a.) | \$_ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$_ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$_ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$_ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$_ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$_ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

Debtor 1

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| | | | | J | | | |
|-------------------------------|--|--|---|--------------------------|---|--|--|
| Fill in | this inf | ormation to identify your case a | nd this filing: | | | | |
| Debto | r 1 | Carmelo Elmer Gurang | o Escolano | | | | |
| Debto | r 2 | First Name | Middle Name Last Name | | | | |
| | e, if filing) | Tracy Renee Geraldo First Name | Middle Name Last Name | | | | |
| United | d States | Bankruptcy Court for the: DISTF | RICT OF NEVADA | | | | |
| _ | | | | | _ | | |
| Case | number | | | | ☐ Check if this is an amended filing | | |
| | | | | | g | | |
| ∩ffi∂ | cial F | orm 106A/B | | | | | |
| | | | | | | | |
| | | ule A/B: Property | List an asset only once. If an asset fits in more than on | Para Para | 12/15 | | |
| think it informa Answer | fits best ation. If n r every qu | Be as complete and accurate as properties of the properties of the second and a separate of the second as the seco | ossible. If two married people are filing together, both ar ate sheet to this form. On the top of any additional page | e equally responsible fo | r supplying correct | | |
| Part 1: | Descri | be Each Residence, Building, Land, | or Other Real Estate You Own or Have an Interest In | | | | |
| 1. D o y | ou own | or have any legal or equitable intere | st in any residence, building, land, or similar property? | | | | |
| ■ N | lo. Go to | Part 2. | | | | | |
| ΠY | es. Whe | re is the property? | | | | | |
| Part 2: | Descri | be Your Vehicles | | | | | |
| □ N | | | | | | | |
| 3.1 | Make: | Chevrolet | Who has an interest in the property? Check one | | Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: | | |
| | Model: | Trailblazer | ☐ Debtor 1 only | | Claims Secured by Property. | | |
| | Year: | 2007 | Debtor 2 only | Current value of the | | | |
| | | mate mileage: 140,000 formation: | ■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another | entire property? | portion you own? | | |
| [| Out of the | omaton. | At least one of the debtors and another | | | | |
| | | | ■ Check if this is community property (see instructions) | \$3,939.0 | \$3,939.00 | | |
| Example 1 | mples: B | pollar value of the portion you ow have attached for Part 2. Write | d other recreational vehicles, other vehicles, and tercraft, fishing vessels, snowmobiles, motorcycle act of the following items? | r entries for | \$3,939.00 Current value of the portion you own? | | |
| | | | | | Do not deduct secured claims or exemptions. | | |

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| | ebtor 1 ebtor 2 | Carmelo Elm Tracy Renee | ner Gurango Escolano Geraldo Case number (if known) | wn) |
|-----|--------------------|---|---|------------------------------------|
| | Example ☐ No | old goods and f es: Major applian Describe | urnishings ces, furniture, linens, china, kitchenware | |
| | - res. | Describe | Household goods and furnishings | \$2,000.00 |
| | | | | |
| 7. | ■ No | es: Televisions a | nd radios; audio, video, stereo, and digital equipment; computers, printers, scanners; mus phones, cameras, media players, games | ic collections; electronic devices |
| | Example □ No | | figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, cons, memorabilia, collectibles | oin, or baseball card collections; |
| | ■ res. | Describe | | |
| | | | Action Figures | \$1,000.00 |
| 9. | Example No | ent for sports ares: Sports, photo musical instru | graphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; cano | es and kayaks; carpentry tools; |
| 10. | ■ No | | s, shotguns, ammunition, and related equipment | |
| | □ No Î | | othes, furs, leather coats, designer wear, shoes, accessories | |
| | | | Clothing and personal effects | \$500.00 |
| | □ No · | | welry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gem | s, gold, silver |
| | | | Gold and diamonds earrings and bracelets | \$2,000.00 |
| | Examp ■ No | rm animals oles: Dogs, cats, | birds, horses | |
| | ■ No | her personal an | d household items you did not already list, including any health aids you did not list | t |
| 15 | | | of all of your entries from Part 3, including any entries for pages you have attached number here | \$5,500.00 |

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| Debtor 2 Debtor 2 | | Gurango Escolano raldo | Case number (if known) | |
|----------------------|--|------------------------------------|--|--|
| | Describe Your Financial A | | | |
| Do you | own or have any legal | or equitable interest in | any of the following? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| ■ No | <i>mples:</i> Money you have | in your wallet, in your ho | me, in a safe deposit box, and on hand when you file your petition | |
| Exa | institutions. If you | | unts; certificates of deposit; shares in credit unions, brokerage hous with the same institution, list each. | es, and other similar |
| □ No ■ Ye | es | | Institution name: | |
| | 17 | 7.1. Savings | Wells Fargo Bank Account No. Ending 5142 | \$4.00 |
| | 17 | 7.2. Checking | Wells Fargo Bank Account No. Ending 4998 | \$70.00 |
| | 17 | 7.3. Checking | Bank of America Account No. Ending 2388 | \$423.00 |
| Exa ■ No | | | kerage firms, money market accounts | |
| | -publicly traded stock a t venture | and interests in incorpo | orated and unincorporated businesses, including an interest in a | an LLC, partnership, and |
| ■ No | - | tion about them Name of entity: | % of ownership: | |
| Neg | gotiable instruments inclu n-negotiable instruments | ide personal checks, cas | tiable and non-negotiable instruments hiers' checks, promissory notes, and money orders. nsfer to someone by signing or delivering them. | |
| | es. Give specific informat | tion about them Issuer name: | | |
| | , | | 03(b), thrift savings accounts, or other pension or profit-sharing plans | s |
| ■ Ye | es. List each account sep Ty | parately. ype of account: | Institution name: | |
| | 4 | 01(k) | Voya | |
| | | | (Balance as of 02/26/2018) | \$100.00 |
| | 4 | 01(k) | Charles Schwab- through employer. Account was opened on approximately 1/1/2018. | Unknown |

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| | ebtor 1 ebtor 2 | Carmelo Elmer Gurango Es Tracy Renee Geraldo | scolano | Ca | ase number (if known) | |
|-----|--------------------|--|---------------------------------------|-------------------------|-------------------------------|---|
| 22. | Your s | y deposits and prepayments hare of all unused deposits you ha bles: Agreements with landlords, p | | | | or others |
| | ■ No □ Yes. | | Institution name | e or individual: | | |
| 23. | _ | ies (A contract for a periodic paym | ent of money to you, either for life | or for a number of y | /ears) | |
| | ■ No □ Yes | Issuer name and de | scription. | | | |
| 24. | 26 U.S.0 | s in an education IRA, in an acc C. §§ 530(b)(1), 529A(b), and 529 | | m, or under a qual | ified state tuition program | 1. |
| | ■ No □ Yes | Institution name and | d description. Separately file the re | ecords of any interes | sts.11 U.S.C. § 521(c): | |
| 25. | ` | equitable or future interests in | property (other than anything li | sted in line 1), and | rights or powers exercisa | able for your benefit |
| | ■ No □ Yes. | Give specific information about th | em | | | |
| 26. | Examp | s, copyrights, trademarks, trade bles: Internet domain names, webs | | | s | |
| | ■ No □ Yes. | Give specific information about th | em | | | |
| 27. | | es, franchises, and other generalles: Building permits, exclusive lic | | ıldings, liquor license | es, professional licenses | |
| | ☐ Yes. | Give specific information about th | em | | | |
| M | oney or | property owed to you? | | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 28. | | unds owed to you | | | | |
| | □ No ■ Yes. | Give specific information about the | m, including whether you already | filed the returns and | I the tax years | |
| | | | | | | |
| | | | 2018 Tax Refund | | | Unknown |
| 29. | Examp ■ No | support oles: Past due or lump sum alimon Give specific information | /, spousal support, child support, | maintenance, divorc | e settlement, property settle | ement |
| | Examp ■ No | amounts someone owes you bles: Unpaid wages, disability insur- benefits; unpaid loans you ma | | s, sick pay, vacation | pay, workers' compensation | on, Social Security |
| 31. | | ts in insurance policies bles: Health, disability, or life insura | nce; health savings account (HSA | A); credit, homeowne | er's, or renter's insurance | |
| | _ | Name the insurance company of e Company n | | Beneficiary | r: | Surrender or refund |

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| Debtor 1 Debtor 2 | Carmelo Elmer Gurango Escolano Tracy Renee Geraldo | Case number (if known) | |
|---|---|------------------------------------|---------------|
| | American National (No Cash Value) | | \$0.00 |
| | American National (No Cash Value) | Office Policy | \$0.00 |
| | John Hancock | | \$500.00 |
| | American National (No Cash Value) | Personal Policy | \$0.00 |
| | John Hancock | | \$500.00 |
| | MetLife Insurance (No Cash Value) | | \$0.00 |
| 33. Claim Exam ■ No □ Yes 34. Other □ No | . Give specific information s against third parties, whether or not you have filed a lawsuit or aples: Accidents, employment disputes, insurance claims, or rights to a contingent and unliquidated claims of every nature, including contingent and claim | sue | et off claims |
| | Earned Income Credit | | Unknown |
| No Yes 36. Add for F | nancial assets you did not already list . Give specific information the dollar value of all of your entries from Part 4, including any every 4. Write that number here | | \$1,597.00 |
| ■ No. G | own or have any legal or equitable interest in any business-related property to to Part 6. Go to line 38. | erty? | |
| | escribe Any Farm- and Commercial Fishing-Related Property You Own or you own or have an interest in farmland, list it in Part 1. | Have an Interest In. | |
| ■ No | ou own or have any legal or equitable interest in any farm- or com or o. Go to Part 7. s. Go to line 47. | nmercial fishing-related property? | |

Official Form 106A/B
Software Copyright (c) 1996-2017 Best Case, LLC - www.bestcase.com

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| Debtor 1 Debtor 2 | Carmelo Elmer Gurango Escolano Tracy Renee Geraldo | | Case number (if known) | |
|----------------------|--|--------------------|------------------------------|-------------|
| Part 7: | Describe All Property You Own or Have an Interest in That You | Did Not List Above | | |
| | ou have other property of any kind you did not already list? nples: Season tickets, country club membership | | | |
| ■ No | | | | |
| ☐ Yes | s. Give specific information | | | |
| 54. Add | I the dollar value of all of your entries from Part 7. Write that | t number here | | \$0.00 |
| | , | | | |
| Part 8: | List the Totals of Each Part of this Form | | | |
| 55. Part | t 1: Total real estate, line 2 | | | \$0.00 |
| 56. Part | t 2: Total vehicles, line 5 | \$3,939.00 | | |
| 57. Part | t 3: Total personal and household items, line 15 | \$5,500.00 | | |
| 58. Part | t 4: Total financial assets, line 36 | \$1,597.00 | | |
| 59. Part | t 5: Total business-related property, line 45 | \$0.00 | | |
| 60. Part | t 6: Total farm- and fishing-related property, line 52 | \$0.00 | | |
| 61. Part | t 7: Total other property not listed, line 54 + | \$0.00 | | |
| 62. Tota | al personal property. Add lines 56 through 61 | \$11,036.00 | Copy personal property total | \$11,036.00 |
| 63. Tota | al of all property on Schedule A/B. Add line 55 + line 62 | | | \$11,036.00 |

| Fill in this infor | mation to identify your | case: | | |
|---------------------|--------------------------|--------------------|-----------|--------------------------------------|
| Debtor 1 | Carmelo Elmer G | urango Escolano | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | Tracy Renee Gera | aldo | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | DISTRICT OF NEVADA | | |
| Case number | | | | |
| (if known) | | | | ☐ Check if this is an amended filing |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amount of the exemption you claim | | Specific laws that allow exemption |
|---|--------------------------------------|-----------------------------------|---|------------------------------------|
| | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | |
| 2007 Chevrolet Trailblazer 140,000 miles | \$3,939.00 | | \$3,939.00 | Nev. Rev. Stat. § 21.090(1)(f) |
| Line from Schedule A/B: 3.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| Household goods and furnishings Line from Schedule A/B: 6.1 | \$2,000.00 | | \$2,000.00 | Nev. Rev. Stat. § 21.090(1)(b) |
| Ente from Genedate AVD. G.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| Action Figures | \$1,000.00 | | \$1,000.00 | Nev. Rev. Stat. § 21.090(1)(a) |
| Ente from Goriodate 7VB. GTT | | | 100% of fair market value, up to any applicable statutory limit | |
| Clothing and personal effects Line from Schedule A/B: 11.1 | \$500.00 | | \$500.00 | Nev. Rev. Stat. § 21.090(1)(b) |
| Ellie II oli i oshedale 70 B. TTT | | | 100% of fair market value, up to any applicable statutory limit | |
| Gold and diamonds earrings and bracelets | \$2,000.00 | | \$2,000.00 | Nev. Rev. Stat. § 21.090(1)(a) |
| Line from Schedule A/B: 12.1 | | | 100% of fair market value, up to any applicable statutory limit | |

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Debtor 1 Carmelo Elmer Gurango Escolano
Debtor 2 Tracy Renee Geraldo

Case number (if known)

| otor 2 Iracy Renee Geraldo | | | Case number (if known) | |
|--|--------------------------------------|------|---|------------------------------------|
| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amo | unt of the exemption you claim | Specific laws that allow exemption |
| | Copy the value from Schedule A/B | Ched | ck only one box for each exemption. | |
| Savings: Wells Fargo Bank | \$4.00 | | 75% | Nev. Rev. Stat. § 21.090(1)(g |
| Account No. Ending 5142 Line from Schedule A/B: 17.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| Checking: Wells Fargo Bank Account No. Ending 4998 | \$70.00 | | 75% | Nev. Rev. Stat. § 21.090(1)(|
| Line from Schedule A/B: 17.2 | | | 100% of fair market value, up to any applicable statutory limit | |
| Checking: Bank of America Account No. Ending 2388 | \$423.00 | • | 75% | Nev. Rev. Stat. § 21.090(1)(|
| Line from Schedule A/B: 17.3 | | | 100% of fair market value, up to any applicable statutory limit | |
| 401(k): Voya | \$100.00 | | \$100.00 | Nev. Rev. Stat. § 21.090(1)(|
| (Balance as of 02/26/2018) Line from <i>Schedule A/B</i> : 21.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| 401(k): Charles Schwab- through employer. Account was opened on | Unknown | | \$0.00 | Nev. Rev. Stat. § 21.090(1)(|
| approximately 1/1/2018. Line from Schedule A/B: 21.2 | | | 100% of fair market value, up to any applicable statutory limit | |
| 2018 Tax Refund Line from Schedule A/B: 28.1 | Unknown | | \$20,000.00 | Nev. Rev. Stat. § 21.090(1)(2 |
| Ellic Holli ochodale Arb. 2011 | | | 100% of fair market value, up to any applicable statutory limit | |
| American National (No Cash Value) | \$0.00 | | \$0.00 | Nev. Rev. Stat. § 21.090(1)(I |
| Line from Schedule A/B: 31.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| American National (No Cash Value) | \$0.00 | | \$0.00 | Nev. Rev. Stat. § 21.090(1)(I |
| Beneficiary: Office Policy Line from Schedule A/B: 31.2 | | | 100% of fair market value, up to any applicable statutory limit | |
| John Hancock Line from Schedule A/B: 31.3 | \$500.00 | | \$500.00 | Nev. Rev. Stat. § 21.090(1)(I |
| | | | 100% of fair market value, up to any applicable statutory limit | |
| American National (No Cash Value) | \$0.00 | | \$0.00 | Nev. Rev. Stat. § 21.090(1)(I |
| Beneficiary: Personal Policy Line from Schedule A/B: 31.4 | | | 100% of fair market value, up to any applicable statutory limit | |
| John Hancock Line from Schedule A/B: 31.5 | \$500.00 | | \$500.00 | Nev. Rev. Stat. § 21.090(1)(|
| EING HOTH SCHEWARE AVD. ST.S | | | 100% of fair market value, up to any applicable statutory limit | |

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| Debtor 1 Debtor 2 | ······································ | | | Case number (if known) | | | |
|----------------------|--|--------------------------------------|-----------------------------------|---|------------------------------------|--|--|
| | description of the property and line on dule A/B that lists this property | Current value of the portion you own | Amount of the exemption you claim | | Specific laws that allow exemption | | |
| | | Copy the value from Schedule A/B | Che | ck only one box for each exemption. | | | |
| | Life Insurance Cash Value) | \$0.00 | | \$0.00 | Nev. Rev. Stat. § 21.090(1)(k) | | |
| • | from Schedule A/B: 31.6 | | | 100% of fair market value, up to any applicable statutory limit | | | |
| | ned Income Credit | Unknown | | 100% | Nev. Rev. Stat. § 21.090(1)(aa) | | |
| Line | Hom Schedule PAB. 34.1 | | | 100% of fair market value, up to any applicable statutory limit | | | |
| | you claiming a homestead exemption ject to adjustment on 4/01/19 and every | | | ed on or after the date of adjustme | nt.) | | |
| | Yes. Did you acquire the property cove | red by the exemption wi | ithin 1 | 215 days before you filed this case | ? | | |
| | □ No | | | | | | |
| | ☐ Yes | | | | | | |

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| Fill in this inform | | | | |
|---------------------|--------------------------|--------------------|-----------|--------------------------------------|
| Debtor 1 | | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | Tracy Renee Gera | aldo | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | DISTRICT OF NEVADA | | |
| Case number _ | | | | ☐ Check if this is an amended filing |

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

| Fill | in this inform | ation to identify your c | ase: | | | | | | |
|------------------------|--|---|---|--|--------------------------------|--------------------|----------|---------------------|----------|
| Deb | otor 1 | Carmelo Elmer Gu | | | | | | | |
| | | First Name | Middle Name | Last Name | | | | | |
| | otor 2 | Tracy Renee Gera | | | | | | | |
| (Spot | use if, filing) | First Name | Middle Name | Last Name | | | | | |
| Unit | ed States Ban | kruptcy Court for the: | DISTRICT OF NEV | /ADA | | | | | |
| Cas | e number | | | | | | | | |
| (if kno | own) | | | | | | Check i | f this is a | n |
| | | | | | |] a | mende | ed filing | |
| ∩ffi | icial Form | 106E/E | | | | | | | |
| | | /F: Creditors W | no Have IIns | ecured Claims | | | | 12/1 | 5 |
| | | | | vith PRIORITY claims and Part 2 | for creditors with NON | IPRIORITY clai | ms lis | | |
| Sche left. <i>A</i> | dule D: Credito Attach the Cont and case num | rs Who Have Claims Secu inuation Page to this page | red by Property. If mo . If you have no infor | orm 106G). Do not include any o ore space is needed, copy the P mation to report in a Part, do no | art you need, fill it out, | number the en | tries in | the boxes | s on the |
| 1. | Do any creditor | rs have priority unsecured | claims against you? | | | | | | |
| | No. Go to Pa | art 2. | | | | | | | |
| | Yes. | | | | | | | | |
| i I | identify what type possible, list the | e of claim it is. If a claim has | both priority and nonp according to the credit | than one priority unsecured claim riority amounts, list that claim here or's name. If you have more than ner creditors in Part 3. | e and show both priority a | and nonpriority | amounts | s. As much | as |
| (| (For an explanat | tion of each type of claim, se | e the instructions for the | nis form in the instruction booklet.) | Total claim | Priority amount | | Nonpriori amount | ity |
| 2.1 | IRS | | Last 4 dig | jits of account number | \$0.00 | \$ | 0.00 | | \$0.00 |
| | , | ditor's Name entralized Insolvency | . When wa | s the debt incurred? | | | | | |
| | Operation | - | , , , , , , , , , , , , , , , , , , , | | | - | | | |
| | P.O. Box | c 7346 | | | | | | | |
| | | phia, PA 19101 | | Later to the state of the Color | | | | | |
| | | reet City State Zlp Code the debt? Check one. | | date you file, the claim is: Chec | k all that apply | | | | |
| | Debtor 1 or | | ☐ Contin | • | | | | | |
| | | , | ☐ Unliqu | idated | | | | | |
| | Debtor 2 or | | ☐ Disput | ed | | | | | |
| | Debtor 1 ar | nd Debtor 2 only | Type of P | Type of PRIORITY unsecured claim: | | | | | |
| | ☐ At least one | e of the debtors and another | ☐ Domes | stic support obligations | | | | | |
| | Check if th | nis claim is for a communi | ty debt Taxes | and certain other debts you owe t | he government | | | | |
| | | ubject to offset? | · | for death or personal injury while | you were intoxicated | | | | |
| | ■ No | • | ☐ Other. | Specify | | | | | |
| | ☐ Yes | | | Notice Only | | | | | |
| Davi | Liet All | of Your NONPRIORITY | / Unaccured Claim | | | | | | |
| | | rs have nonpriority unsecu | | | | | | | |
| | _ ′ | | | | _ | | | | |
| | _ | e noming to report in this pa | it. Submit this form to t | he court with your other schedules | o. | | | | |
| | Yes. | | | | | | | | |
| 1 | unsecured claim | n, list the creditor separately | for each claim. For eac | al order of the creditor who hold th claim listed, identify what type of Part 3.If you have more than three | of claim it is. Do not list cl | aims already ind | cluded i | n Part 1. If | |

Total claim

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| | r 1 Carmelo Elmer Gurango Escolano r 2 Tracy Renee Geraldo | | Case number (if know) | | | | | | |
|-----|---|---|--|------------|--|--|--|--|--|
| 4.1 | 1st Elec Bnk | Last 4 digits of account number | 9778 | \$1,756.00 | | | | | |
| | Nonpriority Creditor's Name | | Opened 08/13 Last Active | | | | | | |
| | 2150 S 1300 E Ste 400 Salt Lake City, UT 84106 | When was the debt incurred? | 7/20/16 | | | | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | | | | | | |
| | ☐ Debtor 1 only | ☐ Contingent | | | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | Disputed | | | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | | | | | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | | | | | |
| | Yes | Other. Specify Charge Acc | count | | | | | | |
| 4.2 | Amex | Last 4 digits of account number | 4993 | \$0.00 | | | | | |
| | Nonpriority Creditor's Name | | Opened 04/14 Last Active | | | | | | |
| | Po Box 297871 Fort Lauderdale, FL 33329 | When was the debt incurred? | 09/15 | | | | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | | | | | | | |
| | Debtor 1 only | ☐ Contingent | | | | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured | | | | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | | | | | | | |
| | ■ No | Debts to pension or profit-sharing | | | | | | | |
| | Yes | ■ Other. Specify Credit Card | <u> </u> | | | | | | |
| 4.3 | Bankamerica | Last 4 digits of account number | 2299 | \$0.00 | | | | | |
| | Nonpriority Creditor's Name 4909 Savarese Cir Tampa, FL 33634 | When was the debt incurred? | Opened 8/31/09 Last Active 4/08/13 | | | | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | | | | | | | |
| | Debtor 1 only | | | | | | | | |
| | Debtor 2 only | ☐ Contingent | | | | | | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Unliquidated | | | | | | | |
| | At least one of the debtors and another | Disputed | 1 claim: | | | | | | |
| | _ | Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts | | | | | | | |
| | ■ Check if this claim is for a community debt Is the claim subject to offset? | | | | | | | | |
| | ■ No | | | | | | | | |
| | ☐ Yes | ■ Other Specify FHA Real E | • • | | | | | | |

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| | r 1 Carmelo Elmer Gurango Escolano Tracy Renee Geraldo | | Case number (if know) | | |
|-----|--|---|---|------------|--|
| 4.4 | Barclays Bank Delaware Nonpriority Creditor's Name | Last 4 digits of account number | 4036 | \$3,171.00 | |
| | Po Box 8803 Wilmington, DE 19899 | When was the debt incurred? | Opened 04/14 Last Active 10/10/16 | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | | |
| | ☐ Debtor 1 only | ☐ Contingent | | | |
| | ■ Debtor 2 only | ☐ Unliquidated | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | | |
| | ■ No | ☐ Debts to pension or profit-sharing | g plans, and other similar debts | | |
| | | Credit Card | I | | |
| | Yes | Other. Specify Lawsuit: C | ase No. 17C026041 | | |
| 4.5 | Capital One | Last 4 digits of account number | 6936 | \$4,742.00 | |
| | Nonpriority Creditor's Name 15000 Capital One Dr Richmond, VA 23238 | When was the debt incurred? | Opened 08/13 Last Active 4/23/16 | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | | | |
| | Debtor 1 only | ☐ Contingent | | | |
| | ■ Debtor 2 only | ☐ Unliquidated | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | | | |
| | ■ No | Debts to pension or profit-sharing | | | |
| | Credit Card | | | | |
| | Yes | ■ Other. Specify Lawsuit: C | ase No. 17C023354 | | |
| 4.6 | Capital One Nonpriority Creditor's Name | Last 4 digits of account number | 1773 | \$3,466.00 | |
| | 15000 Capital One Dr Richmond, VA 23238 | When was the debt incurred? | Opened 08/13 Last Active 5/06/16 | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | | |
| | Debtor 1 only | ☐ Contingent | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | |
| | ☐ Debtor 1 and Debtor 2 only | Disputed | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | | | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not | | | |
| | Is the claim subject to offset? | report as priority claims | | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | |
| | ☐ Yes | ■ Other. Specify Credit Card | I | | |

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| Nonprotity Creditor's Name 15000 Capital One Dr Richmond, VA 23238 Number Street City State 2ip Code When surror the debt? Check one. Debtor 1 and Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only De | | 1 Carmelo Elmer Gurango Escolano 2 Tracy Renee Geraldo | | Case number (if know) | | | | |
|---|-----|---|---|--|------------|--|--|--|
| 15000 Capital One Dr Richmond, VA 23238 Number Street City State 2/jp Code Who incurred the debt? Check one. Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim subject to offset? Check if this claim is for a community debt Check if this claim is the claim is check if this claim is the claim is check all that apply Check if this claim is the claim is check all that apply Check if this claim is the claim is check all that apply Check if this claim is the claim is check all that apply Check if this claim is the claim is check al | 4.7 | | Last 4 digits of account number | 1103 | \$2,923.00 | | | |
| Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 only Debtor 1 and Debtor 4 only Debtor 1 and Debtor 5 only Debtor 6 only Debtor 7 only Debtor 8 only Debtor 9 o | | 15000 Capital One Dr Richmond, VA 23238 | | 4/19/16 | | | | |
| Debtor 2 only Debtor 3 only Debtor 4 and Debtor 2 only Debtor 1 and Debtor 3 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 only 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 only 2 only 3 only 3 only 4 onl | | | • | | | | | |
| Debtor 1 and Debtor 2 only | | Debtor 1 only | ☐ Contingent | | | | | |
| At least one of the debtors and another Check if this claim is for a community debt Student loans Check if this claim is for a community debt Student loans Check if this claim is for a community debt Student loans Check if this claim is for a community debt Student loans Check if this claim is for a community debt Student loans Check if this claim is for a community debt Check if this claim is for a communi | | Debtor 2 only | ☐ Unliquidated | | | | | |
| Check if this claim subject to offset? Codingent Check in this claim subject to offset? Codingent Check if this claim subject to offset? Check if this claim subject to offset? Check if this claim is for a community debt Check if this claim is for | | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| Content to the claim subject to offset? Continuent | | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | | |
| Is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts | | ☐ Check if this claim is for a community | ☐ Student loans | | | | | |
| Cbna Last 4 digits of account number 7175 \$0.00 | | | | ration agreement or divorce that you did not | | | | |
| 4.8 Cbna Nonpriority Creditor's Name Po Box 6283 Sioux Falls, SD 57117 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Debtor 1 sharing plans, and other similar debts Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 offset? State Zip Code Type of NoNPRIORITY unsecured claim: Stock all that apply Credit Card Stock all that apply Student loans Stock all that apply Student loans Stock all that apply Student loans Stude | | No | Debts to pension or profit-sharing | g plans, and other similar debts | | | | |
| Nonpriority Creditor's Name Po Box 6283 Sioux Falls, SD 57117 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 1 only Debtor 1 and Debtor 2 only Debtor street City State Zip Code Who incurred the debt one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Nopopriority Creditor's Name 8860 W Sunset Las Vegas, NV 89148 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 1 and Debtor 2 only Ves CC Coll Svc Nopopriority Creditor's Name 8860 W Sunset Las Vegas, NV 89148 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 1 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Student loans Student loans Credit Card 4.9 Cc Coll Svc Credit Card 4.9 Cc Coll Svc Last 4 digits of account number 1380 \$1,705.0 As of the date you file, the claim is: Check all that apply Who was the debt incurred? Opened 6/13/16 As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Check if this claim is for a community debt Student loans Check if this claim is for a community debt Student loans Debtor 1 and Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Student loans Check if this claim subject to offset? Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 only of a separation agreement or divorce that you did not report as priority claims Debtor 1 only Debtor 2 only Debtor 3 only claims Debtor 4 only claims Debtor 5 only claims Debtor 5 only claims Debtor 6 only claims Debtor 7 only claims Debtor 8 only claims Debtor 8 only claims Debtor 9 only claims De | | Yes | Other. Specify Credit Card | <u> </u> | | | | |
| Po Box 6283 Sioux Falls, SD 57117 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Unliquidated Debtor 1 and Debtor 2 only Debtor 1 sthe claim is for a community debt Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 2 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 6 only Debtor 8 only Debtor 8 only Debtor 9 only Disputed Type of NoNPRIORITY unsecured claim: Student loans Debtor 8 only | I | = | Last 4 digits of account number | 7175 | \$0.00 | | | |
| Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt No Debts to pension or profit-sharing plans, and other similar debts As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Student loans Debtor 1 onfset? Student loans Debtor 1 onfset? Student loans Debtor 1 onfset? Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 6 non-First 1 only Debtor 6 non-First | | Po Box 6283 | When was the debt incurred? | • | | | | |
| Debtor 2 only Debtor 1 and Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Check if this claim is for a community debt Is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts CC COII Svc Nonpriority Creditor's Name 8860 W Sunset Las Vegas, NV 89148 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Contingent Debtor 2 only Debtor 3 and Debtor 2 only Contingent Debtor 4 and Debtor 2 only Contingent Debtor 5 check if this claim is for a community debt Is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts \$1,705.6 \$1,705.6 Debts to pension or profit-sharing plans, and other similar debts \$1,705.6 \$1,705.6 Credit Card Unliquidated Debtor 2 only Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Check if this claim is for a community debt Is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts | - | Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | | | | |
| Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Cother. Specify No Nonpriority Creditor's Name 8860 W Sunset Las Vegas, NV 89148 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 2 only Debtor 2 only Debtor 3 and 10 debtor 3 and another Debtor 4 and Debtor 2 only Cotheck if this claim is for a community debt Street City State Zip Code Who incurred the debtors and another Debtor 1 and Debtor 2 only Cotheck if this claim is for a community debt Street City State Zip Code Contingent Debtor 3 only Debtor 4 and Debtor 5 only Debtor 5 only Debtor 5 only Debtor 6 NonPRIORITY unsecured claim: Student loans Cotheck if this claim is for a community debt Street City State Zip Code Contingent Debtor 6 NonPRIORITY unsecured claim: Student loans Cotheck if this claim is for a community debt Student loans Cotheck if this claim is for a community debt report as priority claims Debtor 1 and Debtor 5 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 only Debtor 4 least one of the debtors and another Check if this claim is for a community debt Student loans Student loans Check if this claim is for a community debt Debtor 2 only Debtor 3 only Debtor 4 separation agreement or divorce that you did not report as priority claims Debtor 4 separation agreement or divorce that you did not report as priority claims Debtor 5 only Debtor 5 only Debtor 5 only Debtor 6 none in a separation agreement or divorce that you did not report as priority claims Debtor 6 only Debtor 6 none in a separation agreement or divorce that you did not report as priority claims Debtor 6 only Debtor 6 none in a separation agreement or divorce that you did not report as priority claims | | Debtor 1 only | ☐ Contingent | | | | | |
| At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims No Debts to pension or profit-sharing plans, and other similar debts Cc Coll Svc Last 4 digits of account number 8860 W Sunset Las Vegas, NV 89148 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Debtor 1 since City Check if this claim is for a community debt Is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts \$1,705.00 \$ \$1,705.00 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ | | ■ Debtor 2 only | ☐ Unliquidated | | | | | |
| Check if this claim is for a community debt Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims No Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card | | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| debt Is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card Last 4 digits of account number 8860 W Sunset Las Vegas, NV 89148 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts Table 1380 \$1,705.0 Credit Card Opened 6/13/16 As of the date you file, the claim is: Check all that apply Contingent Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | | | | | |
| Is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts Cc Coll Svc Nonpriority Creditor's Name 8860 W Sunset Las Vegas, NV 89148 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Set to pension or profit-sharing plans, and other similar debts Credit Card Credit Card \$1,705.0 \$1,705.0 \$1,705.0 \$1,705.0 Credit Card Student number 1380 \$1,705.0 Student in the claim is similar debts \$1,705.0 Student loans Debtor 1 and Debtor 2 only Disputed Type of NoNPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | | ☐ Check if this claim is for a community | ☐ Student loans | | | | | |
| 4.9 Cc Coll Svc Last 4 digits of account number 1380 \$1,705.0 Nonpriority Creditor's Name 8860 W Sunset Las Vegas, NV 89148 When was the debt incurred? Opened 6/13/16 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Contingent Unliquidated Debtor 2 only Disputed At least one of the debtors and another Student loans Check if this claim is for a community debt Is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts | | | | | | | | |
| 4.9 Cc Coll Svc Nonpriority Creditor's Name 8860 W Sunset Las Vegas, NV 89148 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another At least one of the debtors and another Is the claim subject to offset? No No Last 4 digits of account number 1380 State A digits of account number 1380 As of the debt incurred? Opened 6/13/16 As of the claim is: Check all that apply Unliquidated Unliquidated Unliquidated Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising plans, and other similar debts | | No | \square Debts to pension or profit-sharing plans, and other similar debts | | | | | |
| Nonpriority Creditor's Name 8860 W Sunset Las Vegas, NV 89148 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No When was the debt incurred? Opened 6/13/16 As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | | Yes | ■ Other. Specify Credit Card | <u> </u> | | | | |
| When was the debt incurred? Opened 6/13/16 Las Vegas, NV 89148 | 4.9 | | Last 4 digits of account number | 1380 | \$1,705.00 | | | |
| Number Street City State ZIp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtors and another Check if this claim is for a community debt Is the claim subject to offset? No As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply Contingent Unliquidated Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | | 8860 W Sunset | When was the debt incurred? | Opened 6/13/16 | | | | |
| □ Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another Type of NONPRIORITY unsecured claim: □ Check if this claim is for a community debt □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts | - | Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | | | | |
| □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Check if this claim is for a community debt □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts | | Debtor 1 only | Contingent | | | | | |
| □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt □ Is the claim subject to offset? □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts | | ☐ Debtor 2 only | _ | | | | | |
| □ At least one of the debtors and another □ Check if this claim is for a community debt □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts | | ■ Debtor 1 and Debtor 2 only | <u> </u> | | | | | |
| ■ Check if this claim is for a community debt Is the claim subject to offset? No Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts | | _ | • | | | | | |
| debt Is the claim subject to offset? In No Debts to pension or profit-sharing plans, and other similar debts □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts | | Check if this claim is for a community | <u></u> ' | | | | | |
| ■ No □ Debts to pension or profit-sharing plans, and other similar debts | | debt | ☐ Obligations arising out of a sepa | | | | | |
| | | _ | <u>-</u> | | | | | |
| Otner. Specify | | ☐ Yes | Other Specify 12 Dollar Lo | oan Center | | | | |

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| 2 Tracy Renee Geraldo | | Case number (if know) | |
|--|---|---|------------|
| Chase Card | Last 4 digits of account number | 5676 | \$2,488.00 |
| Nonpriority Creditor's Name Po Box 15298 | When was the debt incurred? | Opened 2/10/14 Last Active 12/07/15 | |
| Wilmington, DE 19850 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | is: Check all that apply | |
| ■ Debtor 1 only | ☐ Contingent | | |
| ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only | ☐ Unliquidated ☐ Disputed | | |
| ☐ At least one of the debtors and another ☐ Check if this claim is for a community | Type of NONPRIORITY unsecured ☐ Student loans | d claim: | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | aration agreement or divorce that you did not | |
| No | ☐ Debts to pension or profit-sharin | ng plans, and other similar debts | |
| Yes | Other. Specify Credit Card | <u> </u> | |
| Chase Card | Last 4 digits of account number | 3796 | \$1,953.00 |
| Nonpriority Creditor's Name Po Box 15298 Wilmington, DE 19850 | When was the debt incurred? | Opened 2/10/14 Last Active 12/07/15 | |
| Number Street City State Zlp Code | As of the date you file, the claim i | is: Check all that apply | |
| Who incurred the debt? Check one. | _ | | |
| ■ Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | Lateta | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Student loans ☐ Obligations arising out of a sepa report as priority claims | aration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharin | ng plans, and other similar debts | |
| Yes | Other. Specify Credit Card | 1 | |
| Comenity Bank/torrid Nonpriority Creditor's Name | Last 4 digits of account number | 1815 | \$0.00 |
| Po Box 182789 Columbus, OH 43218 | When was the debt incurred? | Opened 02/13 Last Active 2/18/16 | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | is: Check all that apply | |
| ☐ Debtor 1 only | ☐ Contingent | | |
| ■ Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | report as priority claims | aration agreement or divorce that you did not | |
| No | Debts to pension or profit-sharin | ng plans, and other similar debts | |
| □Yes | ■ Other, Specify Charge Acc | count | |

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| Comenitybank/victoria | Last 4 digits of account number | 6779 | \$0.00 |
|--|---|---|-----------------|
| Nonpriority Creditor's Name | | Opened 09/15 Last Active | |
| Po Box 182789 Columbus, OH 43218 | When was the debt incurred? | 2/16/16 | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | is: Check all that apply | |
| ☐ Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | Obligations arising out of a sepa report as priority claims | aration agreement or divorce that you did not | |
| No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| Yes | Other. Specify Charge Acc | count | |
| O a manufactural di la man | | 6200 | #0.054.0 |
| Comenitycb/hsn Nonpriority Creditor's Name | Last 4 digits of account number | 6398 | \$3,651.32 |
| Po Box 182120 Columbus, OH 43218 | When was the debt incurred? | Opened 6/27/13 Last Active 7/16/16 | |
| Number Street City State Zlp Code | As of the date you file, the claim i | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | , , , | er chook an that apply | |
| ☐ Debtor 1 only | ☐ Contingent | | |
| ■ Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | Obligations arising out of a sepa report as priority claims | aration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| Yes | Other. Specify Charge Acc | count | |
| Credit First N A | | 0595 | \$1,610.00 |
| Nonpriority Creditor's Name | Last 4 digits of account number | | φ1,010.00 |
| 6275 Eastland Rd Brookpark, OH 44142 | When was the debt incurred? | Opened 10/13 Last Active 7/13/16 | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | is: Check all that apply | |
| ☐ Debtor 1 only | ☐ Contingent | | |
| ■ Debtor 2 only | ☐ Unliquidated | | |
| □ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt | | aration agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | | |
| ■ No | Debts to pension or profit-sharin | | |
| □Yes | ■ Other. Specify Charge Acc | count | |

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| 2 Tracy Renee Geraldo | | | |
|---|--|---|------------|
| Credit One Bank Na | Last 4 digits of account number | 1318 | \$0.00 |
| Nonpriority Creditor's Name | | Opened 12/12 Last Active | |
| Po Box 98875 Las Vegas, NV 89193 | When was the debt incurred? | 1/21/16 | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | is: Check all that apply | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| Yes | Other. Specify Credit Card | <u> </u> | |
| Dollar Loan Center | Last 4 digits of account number | | \$1,705.03 |
| Nonpriority Creditor's Name 8665 W. Flamingo Rd., Suite 101 Las Vegas, NV 89147 | When was the debt incurred? | 07/2016 | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | is: Check all that apply | |
| ☐ Debtor 1 only | ☐ Contingent | | |
| ☐ Debtor 2 only | ☐ Unliquidated | | |
| ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ■ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| ■ No | ☐ Debts to pension or profit-sharin | ng plans, and other similar debts | |
| Yes | Other. Specify Loan | | |
| Dolr Ln Cent | Last 4 digits of account number | 7007 | \$0.00 |
| Nonpriority Creditor's Name | | | |
| 6122 W Sahara Ave Las Vegas, NV 89146 | When was the debt incurred? | Opened 9/04/15 Last Active 11/17/15 | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | is: Check all that apply | |
| ☐ Debtor 1 only | ☐ Contingent | | |
| ■ Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharin | ng plans, and other similar debts | |
| ☐ Yes | ■ Other, Specify Unsecured | | |

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| | r 1 Carmelo Elmer Gurango Escolano r 2 Tracy Renee Geraldo | | Case number (if know) | |
|----------|---|---|--|--------|
| 4.1 9 | Dolr Ln Cent | Last 4 digits of account number | 6118 | \$0.00 |
| | Nonpriority Creditor's Name 6122 W Sahara Ave Las Vegas, NV 89146 | When was the debt incurred? | Opened 4/03/15 Last Active 5/19/15 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| | ☐ Debtor 1 only ■ Debtor 2 only | ☐ Contingent ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | ■ Other. Specify Unsecured | _ | |
| 4.2 | Dolr Ln Cent | Last 4 digits of account number | 4262 | \$0.00 |
| | Nonpriority Creditor's Name 6122 W Sahara Ave Las Vegas, NV 89146 | When was the debt incurred? | Opened 12/05/14 Last Active 4/03/15 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | | |
| | Debtor 1 only | ☐ Contingent | | |
| | ■ Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Student loans ☐ Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| | No | ☐ Debts to pension or profit-sharing plans, and other similar debts | | |
| | ☐ Yes | ■ Other. Specify Unsecured | g plans, and other similar debts | |
| 4.2 | D.I.I. O. A | | 0007 | |
| 1 | Dolr Ln Cent Nonpriority Creditor's Name | Last 4 digits of account number | 9227 | \$0.00 |
| | 6122 W Sahara Ave Las Vegas, NV 89146 | When was the debt incurred? | Opened 9/13/14 Last Active 11/24/14 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | ■ Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured | | |
| | ☐ Check if this claim is for a community debt | | ration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims Debts to pension or profit-sharin | a plane, and other similar debte | |
| | ■ No | | y pians, and other similiar debts | |
| | ☐ Yes | Other. Specify Unsecured | | |

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| 2 Tracy Renee Geraldo | | Case number (if know) | |
|--|--|---|------------|
| Dolr Ln Cent | Last 4 digits of account number | 6492 | \$0.00 |
| Nonpriority Creditor's Name 6122 W Sahara Ave | _ | Opened 12/03/13 Last Active | |
| Las Vegas, NV 89146 | When was the debt incurred? | 4/18/14 | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | is: Check all that apply | |
| ☐ Debtor 1 only | ☐ Contingent | | |
| ■ Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| Yes | Other. Specify Unsecured | | |
| Jh Portfolio Debt Equi | Last 4 digits of account number | 3527 | \$1,720.00 |
| Nonpriority Creditor's Name 5757 Phantom Dr Ste 225 | When was the debt incurred? | Opened 02/17 | · |
| Hazelwood, MO 63042 Number Street City State Zlp Code | As of the date you file, the claim i | is: Check all that apply | |
| Who incurred the debt? Check one. | no or the date you me, the claim. | oneok all that apply | |
| ☐ Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | Student loans | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| ■ No | ☐ Debts to pension or profit-sharin | ng plans, and other similar debts | |
| Yes | ■ Other. Specify Factoring C Bank | Company Account Comenity | |
| Kohls/capone | Last 4 digits of account number | 8514 | \$639.00 |
| Nonpriority Creditor's Name N56 W 17000 Ridgewood Dr Menomonee Falls, WI 53051 | When was the debt incurred? | Opened 03/14 Last Active 6/18/16 | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | is: Check all that apply | |
| ☐ Debtor 1 only | ☐ Contingent | | |
| ■ Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| Yes | ■ Other. Specify Charge Acc | count | |

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| | r 1 Carmelo Elmer Gurango Escolano r 2 Tracy Renee Geraldo | | Case number (if know) | | |
|----------|--|--|---|------------|--|
| 4.2 5 | Lane Bryant/Comenity Bank | Last 4 digits of account number | | \$1,719.90 | |
| | Nonpriority Creditor's Name P.O. Box 182789 Columbus, OH 43218 | When was the debt incurred? | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | As of the date you file, the claim is: Check all that apply | | |
| | ☐ Debtor 1 only | ☐ Contingent | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | |
| | ■ Debtor 1 and Debtor 2 only □ Disputed | | | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | |
| | ■ Check if this claim is for a community | ☐ Student loans | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | |
| | Yes | Other. Specify Credit Card | <u> </u> | | |
| 4.2 6 | Lending Club Corp Nonpriority Creditor's Name | Last 4 digits of account number | 6383 | \$0.00 | |
| | 71 Stevenson St Ste 300 San Francisco, CA 94105 | When was the debt incurred? | Opened 05/15 Last Active 2/22/16 | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | | | |
| | ☐ Debtor 1 only | ☐ Contingent | | | |
| | ■ Debtor 2 only | ☐ Unliquidated | | | |
| | ☐ Debtor 1 and Debtor 2 only | Disputed | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | |
| | Yes | Other. Specify | | | |
| 4.2 7 | Lvnv Funding Llc | Last 4 digits of account number | 1318 | \$2,029.00 | |
| | Nonpriority Creditor's Name Po Box 1269 Greenville, SC 29602 | When was the debt incurred? | Opened 08/16 | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | | | |
| | ☐ Debtor 1 only | ☐ Contingent | | | |
| | ■ Debtor 2 only | ☐ Unliquidated | | | |
| | ☐ Debtor 1 and Debtor 2 only | Disputed | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | |
| | ☐ Yes | Factoring C Other. Specify Bank N.A. | Company Account Credit One | | |

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| | 1 Carmelo Elmer Gurango Escolano 2 Tracy Renee Geraldo | | Case number (if know) | | | |
|----------|---|--|---|------------|--|--|
| 4.2 8 | MedSchool Associates South | Last 4 digits of account number | | \$220.00 | | |
| | Nonpriority Creditor's Name P.O.Box 29506 | When was the debt incurred? | 2016 | | | |
| | Las Vegas, NV 89126 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | | | |
| | ☐ Debtor 1 only | ☐ Contingent | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | | |
| | ■ Check if this claim is for a community | ☐ Student loans | | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | | | |
| | No | Debts to pension or profit-sharing | g plans, and other similar debts | | | |
| | Yes | ■ Other. Specify Medical Bil | ls | | | |
| 4.2 | Merrick Bank Corp | Last 4 digits of account number | 1528 | \$1,367.00 | | |
| | Nonpriority Creditor's Name | - | | | | |
| | Po Box 9201 Old Bethpage, NY 11804 | When was the debt incurred? | Opened 03/15 Last Active 10/20/16 | | | |
| | Number Street City State ZIp Code | As of the date you file, the claim | is: Check all that apply | | | |
| | Who incurred the debt? Check one. | | | | | |
| | ☐ Debtor 1 only | ☐ Contingent | | | | |
| | ■ Debtor 2 only | ☐ Unliquidated | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | ☐ Student loans | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | | |
| | Yes | Other. Specify Credit Card | <u> </u> | | | |
| 4.3 | Money Tree | Last 4 digits of account number | | \$1,383.95 | | |
| | Nonpriority Creditor's Name 9470 W. Sahara Avenue Las Vegas, NV 89117 | When was the debt incurred? | 03/06/2016 | | | |
| | Number Street City State ZIp Code | As of the date you file, the claim | is: Check all that apply | | | |
| | Who incurred the debt? Check one. | | | | | |
| | ☐ Debtor 1 only | ☐ Contingent | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | | |
| | ■ Check if this claim is for a community debt | ☐ Student loans ☐ Obligations arising out of a sepa | aration agreement or divorce that you did not | | | |
| | Is the claim subject to offset? | report as priority claims | | | | |
| | ■ No | ☐ Debts to pension or profit-sharing | g plans, and other similar debts | | | |
| | ☐ Yes | Other. Specify Loan | | | | |

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| Debte Debte | or 1 Carmelo Elmer Gurango Escolano Tracy Renee Geraldo | | Case number (if know) | |
|----------------|---|---|---|----------|
| 4.3 1 | Plusfour Inc. | Last 4 digits of account number | 7985 | \$25.00 |
| | Nonpriority Creditor's Name 6345 S Pecos Rd Ste 212 Las Vegas, NV 89120 | When was the debt incurred? | Opened 03/13 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | |
| | ☐ Debtor 1 only | ☐ Contingent | | |
| | ■ Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans | ration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | ifation agreement of divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | ☐ Yes | Other. Specify Associates | Attorney Southwest Medical | |
| 4.3 | Portfolio Recov Assoc | Last 4 digits of account number | 9829 | \$715.00 |
| | Nonpriority Creditor's Name 120 Corporate Blvd Ste 1 Norfolk, VA 23502 | When was the debt incurred? | Opened 03/17 | |
| | Number Street City State Zlp Code | As of the date you file, the claim | | |
| | Who incurred the debt? Check one. | | | |
| | Debtor 1 only | ☐ Contingent | | |
| | ■ Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | lacktriangle At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other. Specify Factoring (Bank | Company Account Synchrony | |
| 4.3 | Syncb/qvc Nonpriority Creditor's Name | Last 4 digits of account number | 9829 | \$715.12 |
| | Po Box 965018 Orlando, FL 32896 | When was the debt incurred? | Opened 07/15 Last Active 7/13/16 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | ■ Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | |
| | ☐ Check if this claim is for a community debt | Student loans | | |
| | Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | | |
| | ☐ Yes | Other. Specify Charge Account | | |

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| | Carmelo Elmer Gurango Escolano Tacy Renee Geraldo | | Case number (if know) | |
|----------|---|--|--|------------|
| 4.3 4 | Syncb/walmart | Last 4 digits of account number | 4221 | \$882.00 |
| | Nonpriority Creditor's Name Po Box 965024 | When was the debt incurred? | Opened 08/15 Last Active 7/19/16 | |
| | El Paso, TX 79998 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | | |
| | Debtor 1 only | ☐ Contingent | | |
| | ■ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans ☐ Obligations arising out of a sepa | ration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | , | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other. Specify Charge Acc | count | |
| 4.3 5 | Td Bank Usa/targetcred | Last 4 digits of account number | 6371 | \$812.00 |
| | Nonpriority Creditor's Name Po Box 673 Minneapolis, MN 55440 | When was the debt incurred? | Opened 08/15 Last Active 6/18/16 | |
| | Number Street City State Zlp Code | As of the date you file, the claim | s: Check all that apply | |
| | Who incurred the debt? Check one. | | | |
| | ☐ Debtor 1 only | ☐ Contingent | | |
| | ■ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans ☐ Obligations arising out of a sepa | | |
| | Is the claim subject to offset? | report as priority claims | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other. Specify Credit Card | l | |
| 4.3 | Tireworks Credit | Last 4 digits of account number | | \$1,610.98 |
| | Nonpriority Creditor's Name P.O. Box 81344 Cleveland, OH 44188 | When was the debt incurred? | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | |
| | ☐ Debtor 1 only | Пол | | |
| | Debtor 2 only | Contingent | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Unliquidated | | |
| | ☐ At least one of the debtors and another | ☐ Disputed Type of NONPRIORITY unsecured | d claim: | |
| | ■ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| | Yes | ■ Other. Specify Unsecured | | |
| | | - Other specify | | |

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| Debto Debto | or 1 Carmelo Elmer Gurango Escolano Tracy Renee Geraldo | | Case number (if know) | | | | | |
|----------------|---|--|--|------------|--|--|--|--|
| 4.3 | Tnb - Target | Last 4 digits of account number | 6166 | \$0.00 | | | | |
| | Nonpriority Creditor's Name Po Box 673 | When was the debt incurred? | Opened 03/02 Last Active | | | | | |
| | Minneapolis, MN 55440 | When was the dest mounted. | 11/24/04 | | | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | | | | | |
| | Debtor 1 only | ☐ Contingent | | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | | | | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | | | | |
| | Yes | ■ Other. Specify Charge Acc | count | | | | | |
| 4.3 | Wells Fargo Nonpriority Creditor's Name | Last 4 digits of account number | 4362 | \$1,091.00 | | | | |
| | Po Box 14517 Des Moines, IA 50306 | When was the debt incurred? | Opened 06/15 Last Active 12/01/17 | | | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | | | | | |
| | ☐ Debtor 1 only | btor 1 only | | | | | | |
| | ■ Debtor 2 only | ■ Debtor 2 only □ Unliquidated | | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | | |
| | debt Is the claim subject to offset? | | | | | | | |
| | ■ No | ☐ Debts to pension or profit-sharin | g plans, and other similar debts | | | | | |
| | Yes | Other. Specify Credit Card | <u> </u> | | | | | |
| 4.3 9 | Wells Fargo Bank Nonpriority Creditor's Name | Last 4 digits of account number | 0471 | \$2,433.00 | | | | |
| | P.O. Box 14517 Saint Petersburg, FL 33733 | When was the debt incurred? | Opened 03/12 Last Active 12/10/17 | | | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim | s: Check all that apply | | | | | |
| | Who incurred the debt? Check one. | | | | | | | |
| | Debtor 1 only | ☐ Contingent | | | | | | |
| | Debtor 2 only | □ Debtor 2 only □ Unliquidated | | | | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured | | | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | | |
| | debt Is the claim subject to offset? | report as priority claims | ration agreement or divorce that you did not | | | | | |
| | No | Debts to pension or profit-sharing | g plans, and other similar debts | | | | | |
| | Yes | Other. Specify Unsecured | | | | | | |

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you

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| Debtor 1 Carmelo Elmer Gurango Esco Tracy Renee Geraldo | lano | Case number (if know) |
|--|---------------------------------------|--|
| have more than one creditor for any of the debts notified for any debts in Parts 1 or 2, do not fill or | | additional creditors here. If you do not have additional persons to be |
| Name and Address | On which entry in Part 1 or Part 2 di | d you list the original creditor? |
| Sherry A. Moore, Esq. | Line 4.4 of (Check one): | ☐ Part 1: Creditors with Priority Unsecured Claims |
| Rausch Sturm Israel Enerson & Hornick, LLC 8691 W. Sahara Ave., Ste. 210 | | ■ Part 2: Creditors with Nonpriority Unsecured Claims |
| Las Vegas, NV 89117 | Last 4 digits of account number | |
| Name and Address | On which entry in Part 1 or Part 2 di | d you list the original creditor? |
| Westley U. Villanueva, Esq. | Line 4.5 of (Check one): | ☐ Part 1: Creditors with Priority Unsecured Claims |
| Patenaude & Felix APC 7271 W. Charleston Blvd., Ste. 100 Las Vegas, NV 89117 | | ■ Part 2: Creditors with Nonpriority Unsecured Claims |
| | Last 4 digits of account number | |

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | 7 | Total Claim |
|-----------------------|-----|---|-----|----|-------------|
| | 6a. | Domestic support obligations | 6a. | \$ | 0.00 |
| Total claims | | | | | |
| from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ | 0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ | 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ | 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ | 0.00 |
| | | | 0.1 | | Total Claim |
| Total | 6f. | Student loans | 6f. | \$ | 0.00 |
| claims from Part 2 | C ~ | Obligations suicing out of a consention agreement or diverse that | | | |
| from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ | 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ | 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ | 46,533.30 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ | 46,533.30 |

| Fill in this infor | mation to identify your | case: | | | |
|---------------------|--------------------------|--------------------|-----------|---|--------------------------------------|
| Debtor 1 | Carmelo Elmer G | urango Escolano | | | |
| | First Name | Middle Name | Last Name | _ | |
| Debtor 2 | Tracy Renee Gera | aldo | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Ba | ankruptcy Court for the: | DISTRICT OF NEVADA | | | |
| Case number _ | | | | | ☐ Check if this is an amended filing |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| ı | Person or | company with | whom you have the | e contract or lease | State what the contract or lease is for |
|-----|-----------|--------------|-------------------|---------------------|---|
| 2.1 | | | | | |
| | Name | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| 2.2 | | | | | |
| | Name | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | <u> </u> |
| 2.3 | Oity | | Otate | Zii Code | |
| 2.0 | Name | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| 2.4 | | | | | |
| | Name | | | | |
| | Number | Street | | | <u> </u> |
| | City | | State | ZIP Code | _ |
| 2.5 | City | | Olato | 211 0000 | |
| | Name | | | | _ |
| | Number | Street | | | <u> </u> |
| | City | | State | ZIP Code | <u> </u> |

Official Form 106G

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| Official Form 106H Schedule H: Your Codebtors Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible, people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Addition your name and case number (if known). Answer every question. 1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor. No Yes 2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territ Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) No. Go to line 3. Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? No Yes. In which community state or territory did you live? Name of your spouse, former spouse, or legal equivalent Number, Street, City, State & Zip Code 3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on St Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or out Column 2. | Additional Page, |
|---|---------------------------------------|
| Debtor 2 Tracy Renee Geraldo (Spouse if, filing) Tracy Renee Geraldo United States Bankruptcy Court for the: DISTRICT OF NEVADA Case number (if known) Check amen Official Form 106H Schedule H: Your Codebtors Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible, people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the ilit tout, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Addition your name and case number (if known). Answer every question. 1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor. No Yes 2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territ Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) No. Go to line 3. Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? No Yes. In which community state or territory did you live? Name of your spouse, former spouse, or legal equivalent Number, Street, City, State & Zip Code 3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filling with you. List in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on St. Form 106D), Schedule EJF (Official Form 106EJF), or Schedule G (Official Form 106G). Use Schedule D, Schedule EJF, out to the contract of the contract of the creditor on St. Form 106D). Schedule EJF (Official Form 106EJF), or Schedule G (Official Form 106G). Use Schedule EJF, out to the contract of the credit of the creditor on St. | 12/15 If two married Additional Page, |
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| Name of your spouse, former spouse, or legal equivalent Number, Street, City, State & Zip Code 3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Sc Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or out Column 2. | s of that person. |
| 3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Sc Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or out Column 2. | 0 0a. po.00 |
| | chedule D (Official |
| Column 1: Your codebtor Name, Number, Street, City, State and ZIP Code Column 2: The creditor to whom y Check all schedules that apply: | ou owe the debt |
| □ Schedule D, line | |
| Name Schedule E/F, line | |
| ☐ Schedule G, line | |
| Number Street | - |
| City State ZIP Code | - |
| | - |
| □ Schedule D, line | |
| Name Schedule E/F, line | |
| ☐ Schedule G, line | |
| Number Street | - |
| City State ZIP Code | - |

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| Fill in this informa | tion to identify your case: | |
|---------------------------------|--|---|
| Debtor 1 | Carmelo Elmer Gurango Escolano | |
| Debtor 2 (Spouse, if filing) | Tracy Renee Geraldo | |
| United States Bar | nkruptcy Court for the: DISTRICT OF NEVADA | |
| Case number (If known) | | Check if this is: An amended filing A supplement showing postpetition chapter |
| Official Fo | orm 106I | 13 income as of the following date: MM / DD/ YYYY |

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | t 1: Describe Employment | | | | |
|----|---|----------------------|-------------|---|-------------------------------|
| 1. | Fill in your employment information. | | Debto | r 1 | Debtor 2 or non-filing spouse |
| | If you have more than one job, | Empleyment status | ■ Em | ployed | ■ Employed |
| | attach a separate page with information about additional | Employment status | ☐ Not | temployed | ☐ Not employed |
| | employers. | Occupation | Dialy | sis Technician | Cordner Financial Services |
| | Include part-time, seasonal, or self-employed work. | Employer's name | Davit | (Summerlin Hospital) | 331 N. Buffalo, Suite C |
| | Occupation may include student or homemaker, if it applies. | Employer's address | •••• | lorth Town Center Drive□ ⁄egas, NV 89144 | Las Vegas, NV 89145 |
| | | How long employed to | nere? | 4 Months | 12 Years |

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2. \$ 2,250.49 \$ 3,416.66

3. Estimate and list monthly overtime pay.

3. +\$ 0.00 +\$ 0.00

4. Calculate gross Income. Add line 2 + line 3.

4. \$ 2,250.49 \$ 3,416.66

Official Form 106I Schedule I: Your Income page 1

| Deb Deb | tor 1 tor 2 | Carmelo Elmer Gurango Escolano Tracy Renee Geraldo | | c | ase | e number (<i>if known</i>) | | | | |
|------------|----------------|---|------------|----|-----------|------------------------------|-----------|-------------|------------------|------------------|
| | Com | vy line 4 hove | 4 | | Fo: | r Debtor 1 | | or Debtor 2 | pouse | |
| | Cop | y line 4 here | 4. | | Φ_ | 2,250.49 | Ф | 3,4 | 416.66 | - |
| 5. | List | all payroll deductions: | | | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5a. | ١. | \$_ | 179.65 | \$ | ! | 577.00 | _ |
| | 5b. | Mandatory contributions for retirement plans | 5b. | | \$_ | 0.00 | \$ | | 0.00 | _ |
| | 5c. | Voluntary contributions for retirement plans | 5c. | | \$_ | 0.00 | \$ | | 0.00 | _ |
| | 5d. | Required repayments of retirement fund loans | 5d. | | \$_ | 0.00 | \$ | | 0.00 | _ |
| | 5e. | Insurance | 5e. | | \$ _ | 488.00 | \$ | | 0.00 | _ |
| | 5f. | Domestic support obligations Union dues | 5f. | | \$ \$ | 0.00 | Φ | | 0.00 | _ |
| | 5g. 5h. | Other deductions. Specify: DVN Charity | 5g. 5h. | | \$ - | 0.00 4.30 | ъ + \$ | | 0.00 | _ |
| | 511. | DVV Trust Charity | | | \$- | 4.30 | · \$ | | 0.00 | _ |
| 6. | Αdd | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | _ 6. | | * – \$ | 676.25 | \$ | | 577.00 | - |
| 7. | | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | | * - \$ | 1,574.24 | \$ | | | _ |
| | | | ٧. | | Φ_ | 1,574.24 | φ | | 839.66 | = |
| 8. | 8a. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a. | | \$ | 0.00 | \$ | | 0.00 | |
| | 8b. | Interest and dividends | 8b. | | \$ | 0.00 | \$ | | 0.00 | _ |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c. | | \$_ | 0.00 | \$ | | 0.00 | _ |
| | 8d. | Unemployment compensation | 8d. | | \$_ | 0.00 | \$ | | 0.00 | _ |
| | 8e. | Social Security | 8e. | ٠. | \$_ | 0.00 | \$ | | 0.00 | _ |
| | 8f. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | 8f. | | \$_ | 0.00 | \$ | | 0.00 | _ |
| | 8g. | Pension or retirement income | 8g. | | \$_ | 0.00 | \$ | | 0.00 | _ |
| | 8h. | Other monthly income. Specify: | _ 8h. | .+ | \$_ | 0.00 | + \$ | | 0.00 | _ |
| 9. | Add | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | | 0.00 | \$ | | 0.00 | 0 |
| 10. | Calo | culate monthly income. Add line 7 + line 9. | 10. | \$ | | 1,574.24 + \$ | | 2,839.66 | = \$ | 4,413.90 |
| | | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | | Ť- | | 1,074.24 | | 2,000.00 | | +,+10.00 |
| 11. | Inclu othe | te all other regular contributions to the expenses that you list in Schedule adde contributions from an unmarried partner, members of your household, your friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not acify: | depe | | | ., | , | | | 0.00 |
| 12. | | the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies | | | | | | t 12. | \$ | 4,413.90 |
| | | | | | | | | | Combin monthl | ned ly income |
| 13. | Do y | you expect an increase or decrease within the year after you file this form No. | ? | | | | | | | |
| | | Yes. Explain: | | | | | | | | |

| Fill in this | information to identify your case: | | | | |
|----------------|---|------------------------|------------------|------------------|---|
| Debtor 1 | Carmelo Elmer Gurango Escolano | | Check | if this is: | |
| | | | _ | n amended filing | |
| Debtor 2 | Tracy Renee Geraldo | | | | ving postpetition chapter the following date: |
| (Spouse, if | filing) | | ' | 3 expenses as or | the following date. |
| United State | es Bankruptcy Court for the: DISTRICT OF NEVADA | | | MM / DD / YYYY | |
| Case numb | per | | | | |
| (If known) | | | | | |
| Officia | al Form 106J | | | | |
| | dule J: Your Expenses | | | | 12/1 |
| Be as cor | mplete and accurate as possible. If two married people a on. If more space is needed, attach another sheet to this if known). Answer every question. | | | | or supplying correct |
| Part 1: | Describe Your Household | | | | |
| _ | is a joint case? | | | | |
| | lo. Go to line 2. | | | | |
| ■ Y | es. Does Debtor 2 live in a separate household? | | | | |
| | ■ No☐ Yes. Debtor 2 must file Official Form 106J-2, Expense | s for Separate House | hold of Debto | or 2. | |
| 2. Do y | ou have dependents? \Bigcup No | · | | | |
| - | ot list Debtor 1 and Yes Fill out this information for | Dependent's relation | | Dependent's age | Does dependent live with you? |
| Debt | .ui 2. | | _ | 90 | |
| | ot state the | Son | | 20 | □ No |
| uepe | endents names. | 3011 | | | ■ Yes □ No |
| | | | | | ☐ Yes |
| | | | | | □ No |
| | | | | | □Yes |
| | | | | | □ No |
| | | | | | ☐ Yes |
| expe your | vour expenses include enses of people other than reself and your dependents? | | | | |
| | Estimate Your Ongoing Monthly Expenses your expenses as of your bankruptcy filing date unless as of a date after the bankruptcy is filed. If this is a supe date. | | | | |
| the value | xpenses paid for with non-cash government assistance of such assistance and have included it on <i>Schedule I:</i> Form 106l.) | | | Your exp | enses |
| | rental or home ownership expenses for your residence. | Include first mortgage | 4 | | 1 000 00 |
| paym | nents and any rent for the ground or lot. | | 4. \$ | | 1,088.00 |
| If no | t included in line 4: | | | | |
| 4a. | Real estate taxes | | 4a. \$ | | 0.00 |
| 4b. | Property, homeowner's, or renter's insurance | | 4b. \$ | | 12.00 |
| 4c. 4d. | Home maintenance, repair, and upkeep expenses Homeowner's association or condominium dues | | 4c. \$ 4d. \$ | | 75.00 0.00 |
| | itional mortgage payments for your residence, such as he | ome equity loans | 5. \$ | | 0.00 |

| Debtor 1 Debtor 2 | | Carmelo Elmer Gurango Escolano Tracy Renee Geraldo | | | Case number (if known) | | | | |
|----------------------|-------------|---|--|---------------|------------------------|----------------------------|--|--|--|
| 6. | Utilit | ties: | | | | | | | |
| 0. | 6a. | | , heat, natural gas | 6a. | \$ | 325.00 | | | |
| | 6b. | Water, se | wer, garbage collection | 6b. | \$ | 0.00 | | | |
| | 6c. | Telephone | e, cell phone, Internet, satellite, and cable services | 6c. | \$ | 445.00 | | | |
| | 6d. | Other. Sp | ecify: | 6d. | \$ | 0.00 | | | |
| 7. | Food | d and hous | ekeeping supplies | 7. | \$ | 850.00 | | | |
| 8. | Child | dcare and d | children's education costs | 8. | \$ | 0.00 | | | |
| 9. | Cloti | hing, laund | lry, and dry cleaning | 9. | \$ | 250.00 | | | |
| 10. | Pers | onal care p | products and services | 10. | \$ | 250.00 | | | |
| 11. | Medi | ical and de | ntal expenses | 11. | \$ | 200.00 | | | |
| 12. | Tran | sportation. | Include gas, maintenance, bus or train fare. | | _ | 252.00 | | | |
| | | | ar payments. | 12. | • | 350.00 | | | |
| | | | clubs, recreation, newspapers, magazines, and books | 13. | · | 25.00 | | | |
| | | | tributions and religious donations | 14. | \$ | 30.00 | | | |
| 15. | | rance. | | • | | | | | |
| | | | nsurance deducted from your pay or included in lines 4 or 2 | | c | 70.00 | | | |
| | | Life insura Health ins | | 15a. 15b. | | 70.00 | | | |
| | | | | | * | 0.00 | | | |
| | | Vehicle in | | 15c. | · | 116.00 | | | |
| 40 | | | urance. Specify: | 15d. | > | 0.00 | | | |
| | Spec | cify: | nclude taxes deducted from your pay or included in lines 4 | or 20. 16. | \$ | 0.00 | | | |
| 17. | | | ease payments: ents for Vehicle 1 | 17a. | ¢ | 0.00 | | | |
| | | | ents for Vehicle 2 | 17a. 17b. | · | 0.00 | | | |
| | | Other. Sp | | 176. 17c. | · | | | | |
| | | Other. Sp | | 17c. 17d. | • | 0.00 | | | |
| 10 | | | ecity. s of alimony, maintenance, and support that you did no | | Φ | 0.00 | | | |
| 10. | | | your pay on line 5, <i>Schedule I, Your Income</i> (Official Fo | | \$ | 0.00 | | | |
| 19. | | | s you make to support others who do not live with you | | \$ | 130.00 | | | |
| | | | port to Mr.'s family in the Phillippines | 19. | * | 100.00 | | | |
| 20. | | | erty expenses not included in lines 4 or 5 of this form | | ur Income. | | | | |
| _0. | | | s on other property | 20a. | | 0.00 | | | |
| | | Real estat | | 20b. | \$ | 0.00 | | | |
| | 20c. | Property, | homeowner's, or renter's insurance | 20c. | \$ | 0.00 | | | |
| | | | nce, repair, and upkeep expenses | 20d. | \$ | 0.00 | | | |
| | | | ner's association or condominium dues | 20e. | \$ | 0.00 | | | |
| 21. | | er: Specify: | | 21. | • | 50.00 | | | |
| | | | | | | | | | |
| 22. | | • | monthly expenses | | _ | | | | |
| | | | through 21. | | \$ | 4,266.00 | | | |
| | 22b. | Copy line 2 | 2 (monthly expenses for Debtor 2), if any, from Official For | m 106J-2 | \$ | | | | |
| | 22c. | Add line 22 | a and 22b. The result is your monthly expenses. | | \$ | 4,266.00 | | | |
| 23. | | - | monthly net income. | | | | | | |
| | | | 12 (your combined monthly income) from Schedule I. | 23a. | · | 4,413.90 | | | |
| | 23b. | Copy you | r monthly expenses from line 22c above. | 23b. | -\$ | 4,266.00 | | | |
| | 23c. | | your monthly expenses from your monthly income. t is your <i>monthly net income</i> . | 23c. | \$ | 147.90 | | | |
| 24. | For exmodif | xample, do yo fication to the | an increase or decrease in your expenses within the year or do you expect to finish paying for your car loan within the year or do you terms of your mortgage? | | | e or decrease because of a | | | |
| | ■ N | | | | | | | | |
| | \square Y | es. | Explain here: | | | | | | |

| Fill in this | s information to identify your case: | | |
|------------------|---|--|---|
| Debtor 1 | Carmelo Elmer Gurango Escolano | | |
| | First Name Middle Name | Last Name | |
| Debtor 2 | Tracy Renee Geraldo | | |
| (Spouse if, fili | ng) First Name Middle Name | Last Name | |
| United Sta | ates Bankruptcy Court for the: DISTRICT OF NEVA | DA | |
| Case num | ber | | |
| (if known) | · · · · · · · · · · · · · · · · · · · | | ☐ Check if this is an |
| | | | amended filing |
| | aration About an Individua | | 12/15 |
| obtaining i | file this form whenever you file bankruptcy schedumoney or property by fraud in connection with a batter that is south. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below | | |
| | Jight Below | | |
| Did y | ou pay or agree to pay someone who is NOT an at | torney to help you fill out bankruptcy forms | ? |
| | No | | |
| | Yes. Name of person | Attach E | Bankruptcy Petition Preparer's Notice, |
| _ | · <u> </u> | Declara | tion, and Signature (Official Form 119) |
| | r penalty of perjury, I declare that I have read the so hey are true and correct. | ummary and schedules filed with this declar | ation and |
| Χ /s | s/ Carmelo Elmer Gurango Escolano | X /s/ Tracy Renee Geraldo | |
| | Carmelo Elmer Gurango Escolano | Tracy Renee Geraldo | |
| | ignature of Debtor 1 | Signature of Debtor 2 | |
| D | ate February 26, 2018 | Date February 26, 2018 | |
| | | | |

| | Lin thin inform | | | | | | | | | |
|------|------------------------------|--|---|---|---|---|--|--|--|--|
| | | nation to identify you | | | | | | | | |
| De | btor 1 | First Name | Gurango Escolano Middle Name | Last Name | | | | | | |
| | btor 2 | Tracy Renee Ge | | | | | | | | |
| (Sp | ouse if, filing) | First Name | Middle Name | Last Name | | | | | | |
| Un | ited States Bar | nkruptcy Court for the: | DISTRICT OF NEVADA | | | | | | | |
| | se number nown) | | | | _ | Check if this is an amended filing | | | | |
| St | | of Financial | Affairs for Individ | | | 4/16 | | | | |
| info | ormation. If m | | attach a separate sheet to t | | equally responsible for sup y additional pages, write yo | | | | | |
| Pa | rt 1: Give D | etails About Your Ma | arital Status and Where You | Lived Before | | | | | | |
| 1. | What is your | current marital statu | ıs? | | | | | | | |
| | ■ Married | | | | | | | | | |
| | □ Not mar | ried | | | | | | | | |
| 2. | During the la | st 3 years, have you | lived anywhere other than v | vhere you live now? | | | | | | |
| | | | | | | | | | | |
| | _ | t all of the places you l | ived in the last 3 years. Do no | t include where you live nov | ٧. | | | | | |
| | Debtor 1 Pri | ior Address: | Dates Debtor 1 | Debtor 2 Prior A | ddress: | Dates Debtor 2 | | | | |
| | 0.770.144 | 0.1 /// | lived there | | | lived there | | | | |
| | Las Vegas | Sahara, #1082 , NV 89117 | From-To: 03/2013 - 06/2 0 | Same as Debtor | 1 | ■ Same as Debtor 1 From-To: | | | | |
| | es and territori No Yes. Ma | es include Arizona, Ca | lifornia, Idaho, Louisiana, Nev | ada, New Mexico, Puerto R | nity property state or territor ico, Texas, Washington and V | | | | | |
| _ | | | | | | | | | | |
| 4. | Fill in the tota | I amount of income yo | nployment or from operating u received from all jobs and a have income that you receive | Il businesses, including part | | ndar years? | | | | |
| | □ No | | | | | | | | | |
| | Yes. Fill | in the details. | | | | | | | | |
| | | | Debtor 1 | | Debtor 2 | | | | | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | | | | |
| | | of current year until d for bankruptcy: | ■ Wages, commissions, bonuses, tips | \$3,959.20 | ☐ Wages, commissions, bonuses, tips | \$0.00 | | | | |
| | | | ☐ Operating a business | | ☐ Operating a business | | | | | |

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Official Form 107

page 1

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| Debtor 1 Carmelo Elmer Gurango Escola Tracy Renee Geraldo | | | | | o Escolan | 0 | | Cas | e number (if known) | | |
|---|------------------|------------|--------------------|-----------------------------------|--------------------------------------|---|-----------------------|---|--|-------------|---|
| | | | | | Debtor 1 | | | | Debtor 2 | | |
| | | | | | Sources | of income that apply. | | income e deductions and ions) | Sources of inco | | Gross income (before deductions and exclusions) |
| | | | dar year Decemb | : er 31, 2017) | ■ Wages bonuses, | s, commissions, tips | | \$53,064.00 | ☐ Wages, comr bonuses, tips | nissions, | \$0.00 |
| | | | | | ☐ Operat | ing a business | | | ☐ Operating a b | ousiness | |
| | | | | before that: er 31, 2016) | ■ Wages bonuses, | s, commissions, tips | | \$45,078.00 | ☐ Wages, comr bonuses, tips | nissions, | \$0.00 |
| | | | | | ☐ Operat | ing a business | | | ☐ Operating a b | ousiness | |
| | | | | | ☐ Wages bonuses, | s, commissions, tips | | \$640.00 | ☐ Wages, comr bonuses, tips | nissions, | \$0.00 |
| | | | | | ■ Operat | ing a business | | | ☐ Operating a b | ousiness | |
| | | No Yes. | Fill in the | details. | | | | | | | |
| | | | | | Debtor 1 Sources of Describe b | | each | s income from source e deductions and | Debtor 2 Sources of inco Describe below. | ome | Gross income (before deductions and exclusions) |
| | | | | | | | exclus | ions) | | | |
| Par 6. | t 3: Are □ | | Debtor Neither | 1's or Debtor 2 Debtor 1 nor D | 's debts pr Debtor 2 has | re You Filed for marily consume s primarily cons amily, or househo | er debts? umer deb | ts. Consumer debt | s are defined in 11 | U.S.C. § 10 | 1(8) as "incurred by an |
| | | | During t | • | • | for bankruptcy, d | lid you pa | any creditor a tota | l of \$6,425* or more | ∍? | |
| | | | □ Yes | s List below of paid that cr | each credito editor. Do n | | nts for do | nestic support oblig | | | he total amount you and alimony. Also, do |
| | | | * Subje | ect to adjustmen | t on 4/01/19 | and every 3 year | rs after tha | at for cases filed on | or after the date of | adjustment | |
| | | Yes. | | | | e primarily cons for bankruptcy, d | | ts. | l of \$600 or more? | | |
| | | | ■ No | | | | | | | | |
| | | | □ Ye | include pay | | omestic support o | | of \$600 or more and s, such as child supp | | | t creditor. Do not nclude payments to an |
| | Cre | editor' | s Name | and Address | | Dates of payme | ent | Total amount paid | Amount you still owe | Was this p | payment for |

Case 18-10974-mkn Doc 1 Entered 02/26/18 16:03:19 Page 48 of 59

| | totor 2 Tracy Renee Geraldo | no | Cas | se number (if known) | | |
|-----|--|---|---|----------------------------------|---|-----------------------|
| 7. | Within 1 year before you filed for bankrupto <i>Insiders</i> include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony. | eneral partners; partner or more of their voting | erships of which yog g securities; and a | ou are a genera ny managing a | al partner; corporations gent, including one for | |
| | ■ No□ Yes. List all payments to an insider. | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for | this payment |
| 3. | Within 1 year before you filed for bankrupto insider? Include payments on debts guaranteed or cos | | | | ccount of a de | ebt that benefited an |
| | No | | | | | |
| | Yes. List all payments to an insider Insider's Name and Address | Dates of payment | Total amount | Amount you | Reason for | this payment |
| | made a name and Address | bates of payment | paid | still owe | Include cred | |
| Par | rt 4: Identify Legal Actions, Repossession | ns, and Foreclosures | | | | |
| | modifications, and contract disputes. No Yes. Fill in the details. Case title Case number Barclays Bank Delaware vs. Tracy R. Geraldo 17C026041 | Nature of the case Monies due and owing | Court or agency Justice Court - Township Regional Justic 200 Lewis Ave P.O. Box 55251 Las Vegas, NV | ce Center nue I1 | Status of the Pending On appe | al |
| | Capital One Bank vs. Tracy R. Geraldo 17C023354 | Monies due and owing | Justice Court - Township Regional Justic 200 Lewis Ave P.O. Box 55251 Las Vegas, NV | ce Center nue | Pending On appe Conclude | |
| 0. | Within 1 year before you filed for bankrupto Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below. | | perty repossessed, f | oreclosed, garnis | shed, attached | I, seized, or levied? |
| | Creditor Name and Address | Describe the Property | • | Date | | Value of the |
| | | Explain what happene | ed | | | property |
| 1. | Within 90 days before you filed for bankrup accounts or refuse to make a payment became No Yes. Fill in the details. | | cluding a bank or fir | nancial institutior | n, set off any a | mounts from your |
| | Creditor Name and Address | Describe the action th | ne creditor took | | action was | Amount |
| | | | | taker | | |

| | | elo Elmer Gurango Esc Renee Geraldo | olano | Case num | ber (if known) | |
|------|---|--|-----------|--|-----------------------------------|-------------------------|
| | | before you filed for bankr ed receiver, a custodian, o | | as any of your property in the possession of er official? | an assignee for the bene | fit of creditors, a |
| Pari | t 5: List Cer | tain Gifts and Contributio | ns | | | |
| 3. | ■ No | s before you filed for bank | ruptcy, (| did you give any gifts with a total value of mo | re than \$600 per person? | ? |
| | per person Person to Wh | otal value of more than \$6 | | Describe the gifts | Dates you gave the gifts | Value |
| | Address: | | | | | |
| 14. | ■ No | s before you filed for bank on the details for each gift or | | did you give any gifts or contributions with a ion. | total value of more than | \$600 to any charity? |
| | more than \$6 Charity's Nan | | | Describe what you contributed | Dates you contributed | Value |
| Pari | t 6: List Cer | tain Losses | | | | |
| | or gambling? | before you filed for bankr | uptcy or | since you filed for bankruptcy, did you lose a | anything because of thef | t, fire, other disaster |
| | | property you lost and | Include | ibe any insurance coverage for the loss the amount that insurance has paid. List pendir fince claims on line 33 of Schedule A/B: Property. | Date of your loss | Value of property lost |
| Pari | 17: List Cer | tain Payments or Transfe | re | , , | | |
| 16. | Within 1 year I consulted about Include any atto | before you filed for bankr out seeking bankruptcy or | uptcy, di | id you or anyone else acting on your behalf p ng a bankruptcy petition? s, or credit counseling agencies for services requ | | rty to anyone you |
| | Person Who Address Email or web Person Who | | You | Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
| | Peters & As 6173 S. Rair Las Vegas, | sociates, LLP nbow Blvd. | | Attorney Fees | 02/05/2018 | \$2,000.00 |
| | 001 Debtoro | ec, Inc. | | Credit Counseling Certificate | 02/05/2018 | \$14.95 |

| | otor 1 otor 2 | Carmelo Elmer Gurango Escolano Tracy Renee Geraldo | 0 | | | Case n | umber (ii | f known) | | |
|-----|-----------------------------|--|------------------------|---|----------------------------------|----------------------|-----------|---|-------|--|
| 17. | promis | n 1 year before you filed for bankruptcy sed to help you deal with your creditor include any payment or transfer that you | rs or | to make payments | | | lf pay or | transfer any prope | rty 1 | o anyone who |
| | ■ N | lo es. Fill in the details. | | | | | | | | |
| | Perso Addre | on Who Was Paid ess | | Description and v transferred | alue of any pro | operty | | Date payment or transfer was made | | Amount o paymer |
| | Include include | n 2 years before you filed for bankrupto erred in the ordinary course of your bu e both outright transfers and transfers ma e gifts and transfers that you have already | u sine ide a | ess or financial affa s security (such as t | i rs? he granting of a | | | | | |
| | ■ N | lo es. Fill in the details. | | | | | | | | |
| | | on Who Received Transfer | | Description and v property transferr | | pay | | ny property or received or debts hange | | ate transfer was ade |
| | Perso | on's relationship to you | | | | | | | | |
| 19. | benefi N | a 10 years before you filed for bankrupt iciary? (These are often called asset-pro- lo es. Fill in the details. | | | y property to a | a self-set | tled trus | st or similar device | of w | hich you are a |
| | Name | e of trust | | Description and v | alue of the pro | perty tra | ansferre | d | | ate Transfer wa ade |
| | Within sold, r Includ house | List of Certain Financial Accounts, Ins n 1 year before you filed for bankruptcy moved, or transferred? le checking, savings, money market, o is, pension funds, cooperatives, assoc lo es. Fill in the details. | /, we r oth | ere any financial ac | counts or inst | ruments s of depo | held in | | | |
| | | e of Financial Institution and BSS (Number, Street, City, State and ZIP | | t 4 digits of ount number | Type of acco | ount or | clos | e account was sed, sold, /ed, or sferred | ı | Last balanc before closing o transfe |
| 21. | cash, | u now have, or did you have within 1 y or other valuables? lo es. Fill in the details. | ear I | before you filed for | bankruptcy, a | iny safe d | deposit | box or other depos | itor | y for securities, |
| | | e of Financial Institution SSS (Number, Street, City, State and ZIP Code) | | Who else had acc Address (Number, State and ZIP Code) | | Descril | be the c | ontents | | Do you still have it? |
| 22. | Have y | you stored property in a storage unit o | r pla | ce other than your | home within 1 | 1 year be | fore you | u filed for bankrupto | cy? | |
| | ■ N | lo es. Fill in the details. | | | | | | | | |
| | Name | e of Storage Facility ess (Number, Street, City, State and ZIP Code) | | Who else has or h to it? Address (Number, State and ZIP Code) | | Descri | be the c | ontents | | Do you still have it? |

| | otor 1 otor 2 | Carmelo Elmer Gurango Escolano Tracy Renee Geraldo | | Ca | ase number (if known) | | | | |
|-----|--|---|---|--------|-------------------------------------|-----------------------|--|--|--|
| Pai | t 9: | Identify Property You Hold or Control for | Someone Else | | | | | | |
| 23. | • | ou hold or control any property that someo | ne else owns? Include any prope | ty y | ou borrowed from, are storing for | , or hold in trust | | | |
| | | No Yes. Fill in the details. | | | | | | | |
| | | ner's Name Iress (Number, Street, City, State and ZIP Code) | Where is the property? (Number, Street, City, State and ZIP Code) | De | escribe the property | Value | | | |
| Pa | t 10: | Give Details About Environmental Informa | ation | | | | | | |
| For | the p | urpose of Part 10, the following definitions | apply: | | | | | | |
| | toxic | ironmental law means any federal, state, or c substances, wastes, or material into the a lations controlling the cleanup of these sul | ir, land, soil, surface water, groun | _ | • | | | | |
| | | means any location, facility, or property as wn, operate, or utilize it, including disposal | - | law, | , whether you now own, operate, o | or utilize it or used | | | |
| | | ardous material means anything an environ ardous material, pollutant, contaminant, or s | | s wa | este, hazardous substance, toxic s | ubstance, | | | |
| Rep | ort al | I notices, releases, and proceedings that yo | ou know about, regardless of whe | n the | ey occurred. | | | | |
| 24. | Has | any governmental unit notified you that you | u may be liable or potentially liable | un | der or in violation of an environme | ental law? | | | |
| | | No Yes. Fill in the details. | | | | | | | |
| | | ne of site Iress (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State an ZIP Code) | d | Environmental law, if you know it | Date of notice | | | |
| 25. | Have you notified any governmental unit of any release of hazardous material? | | | | | | | | |
| | | No Yes. Fill in the details. | | | | | | | |
| | | ne of site Iress (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State an ZIP Code) | d | Environmental law, if you know it | Date of notice | | | |
| 26. | Have | e you been a party in any judicial or adminis | strative proceeding under any env | iron | mental law? Include settlements a | and orders. | | | |
| | | No Yes. Fill in the details. | | | | | | | |
| | | e Title e Number | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Na | ature of the case | Status of the case | | | |
| Pai | t 11: | Give Details About Your Business or Con | nections to Any Business | | | | | | |
| 27. | With | in 4 years before you filed for bankruptcy, o | did you own a business or have ar | ıy oʻ | f the following connections to any | business? | | | |
| | | ☐ A sole proprietor or self-employed in a t | rade, profession, or other activity | , eith | ner full-time or part-time | | | | |
| | ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) | | | | | | | | |
| | | ☐ A partner in a partnership | | | | | | | |
| | ☐ An officer, director, or managing executive of a corporation | | | | | | | | |
| | | ☐ An owner of at least 5% of the voting or | equity securities of a corporation | | | | | | |

Official Form 107

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| | otor 1 Carmelo Elmer Gurango Escolar Tracy Renee Geraldo | no | Cas | se number (if known) |
|---------------------|--|--------------------|--------------------------------|--|
| | ■ No. None of the above applies. Go to l □ Yes. Check all that apply above and fil | | elow for each business. | |
| | Business Name Address (Number, Street, City, State and ZIP Code) | | ature of the business | Employer Identification number Do not include Social Security number or ITIN. Dates business existed |
| !8. | Within 2 years before you filed for bankrup institutions, creditors, or other parties. No Yes. Fill in the details below. | tcy, did you give | a financial statement to an | nyone about your business? Include all financial |
| | Name Address (Number, Street, City, State and ZIP Code) | Date Issued | | |
| Par | t 12: Sign Below | | | |
| are t vith | | false statement, | concealing property, or ol | declare under penalty of perjury that the answers btaining money or property by fraud in connection rs, or both. |
| | Carmelo Elmer Gurango Escolano | | cy Renee Geraldo | |
| | rmelo Elmer Gurango Escolano | • | Renee Geraldo | |
| Sig | nature of Debtor 1 | Signat | ure of Debtor 2 | |
| Dat | e February 26, 2018 | Date | February 26, 2018 | |
| Did y ■ N □ Y | | ent of Financial A | Affairs for Individuals Filing | g for Bankruptcy (Official Form 107)? |
| ■ N | you pay or agree to pay someone who is no lo 'es. Name of Person Attach the Bankru | · | | |

B2030 (Form 2030) (12/15)

United States Bankruptcy Court District of Nevada

| In | re Carmelo Elmer Gurango Escolano Tracy Renee Geraldo | | Case No. | | |
|-----|--|--------------------------------------|--|---|-----------|
| | | Debtor(s) | Chapter | 13 | |
| | DISCLOSURE OF COMPE | NSATION OF ATTOR | RNEY FOR DE | CBTOR(S) | |
| 1. | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016 compensation paid to me within one year before the filir be rendered on behalf of the debtor(s) in contemplation of | (b), I certify that I am the attorn | ey for the above nan or agreed to be paid | ned debtor(s) and that to me, for services rende | red or to |
| | For legal services, I have agreed to accept | | \$ | 6,000.00 | |
| | Prior to the filing of this statement I have received. | | | 2,000.00 | |
| | Balance Due | | \$ | 4,000.00 | |
| 2. | \$310.00 of the filing fee has been paid. | | | | |
| 3. | The source of the compensation paid to me was: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 4. | The source of compensation to be paid to me is: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 5. | ■ I have not agreed to share the above-disclosed comp | pensation with any other person | unless they are mem | bers and associates of my | law firm. |
| | ☐ I have agreed to share the above-disclosed compension copy of the agreement, together with a list of the national control of the agreement. | | | | irm. A |
| 6. | In return for the above-disclosed fee, I have agreed to re | ender legal service for all aspect | s of the bankruptcy c | ase, including: | |
| | a. Representation of the debtor in adversary proceedingb. [Other provisions as needed]N/A | s and other contested bankrupto | ry matters; | | |
| 7. | By agreement with the debtor(s), the above-disclosed fee N.A | e does not include the following | service: | | |
| | | CERTIFICATION | | | |
| thi | I certify that the foregoing is a complete statement of an s bankruptcy proceeding. | y agreement or arrangement for | payment to me for re | epresentation of the debte | or(s) in |
| | February 26, 2018 | /s/ Xenophon Pet | | | _ |
| | Date | Xenophon Peters Signature of Attorne | · • | | |
| | | Peters & Associa | tes, LLP. | | |
| | | 6173 S. Rainbow Las Vegas, NV 89 | | | |
| | | Name of law firm | | | - |
| | | | | | |

United States Bankruptcy Court District of Nevada

| In re | Carmelo Elmer Gurango Escolano Tracy Renee Geraldo | | Case No. | |
|--------|---|---|----------|---------------------|
| | Tracy Refiee Geraldo | Debtor(s) | Chapter | 13 |
| The ab | VERIFIC. | ATION OF CREDITOR | | of their knowledge. |
| Date: | February 26, 2018 | /s/ Carmelo Elmer Gurango Carmelo Elmer Gurango Esc | | |
| Date: | February 26, 2018 | Signature of Debtor /s/ Tracy Renee Geraldo Tracy Renee Geraldo | | |

Signature of Debtor

Carmelo Elmer Gurango Escolano Tracy Renee Geraldo 8321 W. Sahara Avenue, Apt. 2117 Las Vegas, NV 89117

Xenophon Peters, Esq. Peters & Associates, LLP. 6173 S. Rainbow Blvd. Las Vegas, NV 89118

1st Elec Bnk Acct No xxxxxxxxxxxx9778 2150 S 1300 E Ste 400 Salt Lake City, UT 84106

Amex Acct No xxxxxxxxxxx4993 Po Box 297871 Fort Lauderdale, FL 33329

Bankamerica Acct No xxxxx2299 4909 Savarese Cir Tampa, FL 33634

Barclays Bank Delaware Acct No xxxxxxxxxx4036 Po Box 8803 Wilmington, DE 19899

Capital One Acct No xxxxxxxxxxx6936 15000 Capital One Dr Richmond, VA 23238

Capital One Acct No xxxxxxxxxxx1773 15000 Capital One Dr Richmond, VA 23238

Capital One Acct No xxxxxxxxxxxx1103 15000 Capital One Dr Richmond, VA 23238

Cbna
Acct No xxxxxxxxxxxx7175
Po Box 6283
Sioux Falls, SD 57117

Cc Coll Svc Acct No xxx1380 8860 W Sunset Las Vegas, NV 89148 Chase Card
Acct No xxxxxxxxxxx5676
Po Box 15298
Wilmington, DE 19850

Chase Card
Acct No xxxxxxxxxxx3796
Po Box 15298
Wilmington, DE 19850

Comenity Bank/torrid Acct No xxxxxxxxxxx1815 Po Box 182789 Columbus, OH 43218

Comenitybank/victoria Acct No xxxxxxxxxxx6779 Po Box 182789 Columbus, OH 43218

Comenitycb/hsn Acct No xxxxxxxxxxx6398 Po Box 182120 Columbus, OH 43218

Credit First N A
Acct No xxxxx0595
6275 Eastland Rd
Brookpark, OH 44142

Credit One Bank Na Acct No xxxxxxxxxxx1318 Po Box 98875 Las Vegas, NV 89193

Dollar Loan Center 8665 W. Flamingo Rd., Suite 101 Las Vegas, NV 89147

Dolr Ln Cent Acct No xxx7007 6122 W Sahara Ave Las Vegas, NV 89146

Dolr Ln Cent Acct No xxx6118 6122 W Sahara Ave Las Vegas, NV 89146

Dolr Ln Cent Acct No xxx4262 6122 W Sahara Ave Las Vegas, NV 89146 Dolr Ln Cent Acct No xxx9227 6122 W Sahara Ave Las Vegas, NV 89146

Dolr Ln Cent Acct No xxx6492 6122 W Sahara Ave Las Vegas, NV 89146

IRS

Attn: Centralized Insolvency Operations P.O. Box 7346 Philadelphia, PA 19101

Jh Portfolio Debt Equi Acct No xxxxxxxx3527 5757 Phantom Dr Ste 225 Hazelwood, MO 63042

Kohls/capone Acct No xxxxxxxxxxxx8514 N56 W 17000 Ridgewood Dr Menomonee Falls, WI 53051

Lane Bryant/Comenity Bank P.O. Box 182789 Columbus, OH 43218

Lending Club Corp Acct No xxxx6383 71 Stevenson St Ste 300 San Francisco, CA 94105

Lvnv Funding Llc Acct No xxxxxxxxxxx1318 Po Box 1269 Greenville, SC 29602

MedSchool Associates South P.O.Box 29506 Las Vegas, NV 89126

Merrick Bank Corp Acct No xxxxxxxxxxx1528 Po Box 9201 Old Bethpage, NY 11804

Money Tree 9470 W. Sahara Avenue Las Vegas, NV 89117 Plusfour Inc. Acct No xxx7985 6345 S Pecos Rd Ste 212 Las Vegas, NV 89120

Portfolio Recov Assoc Acct No xxxxxxxxxxxx9829 120 Corporate Blvd Ste 1 Norfolk, VA 23502

Sherry A. Moore, Esq.
Acct No xxxxxxxxxx4036
Rausch Sturm Israel Enerson &
Hornick, LLC
8691 W. Sahara Ave., Ste. 210
Las Vegas, NV 89117

Syncb/qvc Acct No xxxxxxxxxxx9829 Po Box 965018 Orlando, FL 32896

Syncb/walmart Acct No xxxxxxxxxxx4221 Po Box 965024 El Paso, TX 79998

Td Bank Usa/targetcred Acct No xxxxxxxxxxx6371 Po Box 673 Minneapolis, MN 55440

Tireworks Credit P.O. Box 81344 Cleveland, OH 44188

Tnb - Target Acct No xxxxx6166 Po Box 673 Minneapolis, MN 55440

Wells Fargo Acct No xxxxxxxxxxx4362 Po Box 14517 Des Moines, IA 50306

Wells Fargo Bank Acct No xxxxxxxxxxxx0471 P.O. Box 14517 Saint Petersburg, FL 33733 Westley U. Villanueva, Esq. Acct No xxxxxxxxxxx6936 Patenaude & Felix APC 7271 W. Charleston Blvd., Ste. 100 Las Vegas, NV 89117